

MATERIAL REVIEWED AT CIA HEADQUARTERS BY  
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: Fleipes, Daniel  
OP FILE

**INCLUSIVE DATES:** \_\_\_\_\_

**CUSTODIAL UNIT/LOCATION:** \_\_\_\_\_

ROOM: \_\_\_\_\_

DELETIONS, IF ANY: MOTRIN® AFTER 1967

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

MATERIAL REVIEWED AT CIA HEADQUARTERS BY  
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: FLORES, DAVID  
OP FILE

**INCLUSIVE DATES:**

**CUSTODIAL UNIT/LOCATION:**

**ROOM:** \_\_\_\_\_

DELETIONS, IF ANY: MATERIAL AFTER 1967

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

- ADMINISTRATIVE - INTERNAL USE ONLY

NAME OF EMPLOYEE (Last-First-Middle) FLORES, Daniel	NAME AND RELATIONSHIP OF DEPENDENT self	CLAIM NUMBER 79 0606

There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on 1/4/79.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE 7 Jun 1979	SIGNATURE OF BPD REPRESENTATIVE 
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**NOTICE OF OFFICIAL DISABILITY CLAIM FILE**

ADMINISTRATIVE - INTERNAL USE ONLY

(Large diagonal hatching pattern)		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
FLORES, Daniel	Self	78-0668
<p>There is on file in the Personal Affairs Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>4/12/78</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BUD REPRESENTATIVE	
6/6/78	<input type="text"/>	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

117, 1076 ••• present value

ADMINISTRATIVE - INTERNAL USE ONLY

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SECRET  
(If Area Filled In)

31 JAN 1978

C REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1 SERIAL NUMBER	2 NAME (Last-First-Middle)							27 January 1978	
036130	Flores, Daniel								
3 NATURE OF PERSONNEL ACTION								4 EFFECTIVE DATE REQUESTED	
Reassignment								MONTH DAY YEAR 02 11 78	
6 FUNDS								7. PAY AND NSCA	
V TO V		V TO C		C TO V		C TO C		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
								8035 0990 0000	
9 ORGANIZATIONAL DESIGNATIONS								10 LOCATION OF OFFICIAL STATION	
DDO/LA Division Foreign Field								Station	
11 POSITION TITLE								12 POSITION NUMBER	
Operations Officer (14)								GK76	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.)								13 OCCUPATIONAL SERIES	
GS								0136.01	
15 GRADE AND STEP								16 SALARY OR RATE	
2								\$ 26887	
18 REMARKS								This action reflects WGL- 1/29/78	
Reassigned from position FS35								CMS/MSB	
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED	18B SIGNATURE OF C				DATE SIGNED
J. Halpin CLA/PERS				1/27/78	CMS LT				1/29/78
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING	22 STATION CODE	23 INTEGEE CODE	24 HOURS	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LET	
37	10	51620 LA	45075	3					
28 SITE EXPRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA				
MO. DA YE				TYPE	MO. DA YE				
33 PET PREFERENCE		34 WEF COMP DATE	35 LONG COMP DATE	36 CAREER CATEGORY	39 LEGAL HEALTH INSURANCE	40 SOCIAL SECURITY NO			
CODE	0-REG 1-1 PT 2-10 PT	MO DA YE	MO DA YE	CAB, RSP, PDR, TSP	CODE	0-UNIV 1-PT 2-PGP 3-ASSOC	CODE		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVES CAT	43	FEDERAL TAX DATA		44 STATE TAX DATA			
CODE	0-00 PENTAGON SERVICE 1-00 DOD OR DIA 2-00 DIA OR DOD 3-00 DIA OR DOD (DOD DIA) 4-00 DIA OR DOD (DOD DIA)	CODE		NO TAX EXEMPTIONS	NO TAX EXEMPTIONS	CODE	NO TAX STATE CODE		
45 POSITION CONTROL CERTIFICATION		46 Q.P APPROVAL				DATE APPROVED			
1-27-78 AED						1-31-78			
100-1152 USE PREVIOUS EDITION 100-1152									
SECRET									
82. IMPDET CL BY. 007622									

<input type="checkbox"/> SECRET	<input type="checkbox"/> CONFIDENTIAL	<input type="checkbox"/> INTERNAL USE ONLY	UP... FILED <i>Jee</i>				
<b>REQUEST FOR PCS OVERSEAS EVALUATION</b>		15 DATE <b>12 Sept 77</b>	16 REQUEST DATE FOR REVIEW 12 Sept 77	17 APPLICANT HAS BEEN SEEN BY OMS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Y/N 18 DEPENDENT(S) <input checked="" type="checkbox"/> EMPLOYEE 19 DEPENDENT(S) 20 SEX <b>M</b>			
21 NAME (Last, First, Middle) <b>Flores, Daniel</b>		22 GRADE <b>O-5</b>	23 AFFILIATION CO <b>EDO/LA</b>	24 DIRECTORATE/OFFICE DIVISION <b>EDO</b>	25 EMP NO <b>5270</b>	26 POSITION TITLE <b>Opn Officer</b>	27 DEPENDENT PREVIOUSLY SEEN BY OMS (y/n) <b>N</b>
COMPLETE 13-19 FOR EACH DEPENDENT TO ACCOMPANY OR RETURN WITH EMPLOYEE ONLY IF 2 IS CHECKED 'DEPENDENT(S)' 13 DEPENDENT NAME (L/F/M) 14 SOC SEC NO 15 DOB (MMYY) 16 SEX 17 RELATIONSHIP 18 DEPENDENT PREVIOUSLY SEEN BY OMS (y/n) 19 POSITION							
20 REQUESTED ACTION (Leave check boxes if applicable)							
APPLICANT:	PRE EMPLOYMENT...	EDO	FTD/ETA/DM NO/RS		NO OF DEPENDENTS TO ACCOMPANY OR RETURN		
ASSIGNMENTS.	O/SPCS	STATION	14 Oct 77		2		
	O/TODY		POSITION				
	O/S RETURNEE	FITNESS FOR DUTY					
	O/TODY STANDBY	RETURN TO DUTY					
O/S PLANNING	SPECIAL TRAINING						
SEPARATION	RETIREMENT	MOR/CIARDS	OTHER (MMYY)		MOR/CSC		
ROUTINE	REGULAR ANNUAL	EXECUTIVE ANNUAL			MPT/PHE		
21 COMMENTS  Assignment to [REDACTED] has been canceled. Subject is now being considered for [REDACTED]							
22 REQUESTING DIRECTORATE/OFFICE DIV <b>EDO/LA/PERS</b>	23 ROOM/BLDG <b>31310 Regs</b>	24 EXTENSION <b>5270</b>	25 SIGNATURE OF REQUESTING OFFICER				
26 OFFICE OF SECURITY DISPOSITION							
27 OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION							
QUALIFIED FOR PROPOSED ASSIGNMENT OVERSEAS Jesus Flores [REDACTED] 7 OCT 1977 Chairman, Overseas Candidate Review Panel							
<input type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> INTERNAL USE ONLY	<input type="checkbox"/> CONFIDENTIAL	<input type="checkbox"/> SECRET	28 APPROVAL BY			

SF 269B 20 SEP 1973 EDITION 1000 FORMS

8 - OPA/NAS  
(where applicable)

SECRET

28 :: 377

REQUEST FOR PERSONNEL ACTION								DATE PREPARED 21 March 1977			
1 SERIAL NUMBER		2 NAME (Last-First-Middle)									
036130		FLORES, DANIEL									
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT SYSTEM				4 EFFECTIVE DATE REQUESTED		5 CATEGORY OF EMPLOYMENT					
6 FUNDS		V TO V	V TO CF	MONTH 04	DAY 10	YEAR 77	REGULAR				
		CF TO V	X CF TO CF	7. PAY AND NSCA		8. LEGAL AUTHORITY (Completed by Office of Personnel)					
9. ORGANIZATIONAL DESIGNATIONS DDO/LA				7135-4534-0000		PL 88-643, Sect. 203					
				10. LOCATION OF OFFICIAL STATION WASH., D.C.							
11. POSITION TITLE				12 POSITION NUMBER		13 CAREER SERVICE DESIGNATION DQG					
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) (45)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP OB-13		17 SALARY OR RATE \$					
18 REMARKS SUBJECT REMOVED FROM SYSTEM IN ACCORDANCE WITH HN 20-763.											
18A SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING		22 STATION CODE	23 INTEGEE CODE	24 HQGTRS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LS		
		NUMERIC	ALPHABETIC				MO DA YR	MO DA YR	MO DA YR		
28 SITE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA		31 SEPARATION DATA CODE	32 CORRECTION/CANCELLATION DATA		33 SECURITY REG RD	34 SEC			
MO DA YR		1-CSC 2-OGRB 3-FICA 4-BORN	CODE	1	TYPE	MO DA YR					
35 VET PREFERENCE	36 SERV COMB DATE	37 LDRG COMB DATE	38 CAREER CATEGORY	39 FEDERAL HEALTH INSURANCE	40 SOCIAL SECURITY NO						
CODE	MO DA YR	MO DA YR	CAREER PROV. TEMP	CODE	CODE	CODE	CODE	CODE			
5-BOHE 1-1 PT 3-10 PT				6-MAINTEN 1-PT 2-100% 3-100% 4-100%	1-100% 2-100% 3-100%	1-100% 2-100% 3-100%	1-100% 2-100% 3-100%	1-100% 2-100% 3-100%			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE				42 LEAVE EAT CODE	43 FEDERAL TAX DATA		44 STATE TAX DATA				
CODE					FORM EXECUTED	CODE	MO TAX EXEMPTIONS	FORM EXECUTED	CODE	MO TAX EXEMPTIONS	STATE CODE
6-NO PREVIOUS SERVICE 1-100% CIVILIAN 2-CIVILIAN SERVICE LESS THAN 3 YEARS 3-CIVILIAN SERVICE MORE THAN 3 YEARS					1-PT 2-00			1-PT 2-00			
45 POSITION CONTROL CERTIFICATION <i>MAP 1977</i> <i>3-24 77</i>										DATE APPROVED <i>2 April 77</i>	
46 O.P. APPROVALS											
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REQUEST FOR PERSONNEL ACTION								DATE PREPARED		
1. SERIAL NUMBER		2. NAME (Last-First-Middle)						15 February 1977		
036130		Flores, Daniel								
3. NATURE OF PERSONNEL ACTION Reassignment								4. EFFECTIVE DATE REQUESTED		
								MONTH	DAY	YEAR
								02	26	77
5. FUNDS		V TO V		V TO C				6. CATEGORY OF EMPLOYMENT		
		C TO V	X	C TO C				Regular		
7. FAN AND NSCA 7135-1534 0000								8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDO/LA Division Cuba Operations Group EA Area								10. LOCATION OF OFFICIAL STATION Washington, D. C.		
11. POSITION TITLE Operations Officer								12. POSITION NUMBER (13) FS35	13. CAREER SERVICE DESIGNATION DQG	
14. CLASSIFICATION SCHEDULE (GS, LS, GS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 1		17. SALARY OR RATE \$24,308				
18. REMARKS Reassigned from DDO/LA Position CQ 66										
CMS/MSB				2-17-77						
19A. SIGNATURE OF REQUESTING OFFICIAL <i>J. Halpin</i> J. Halpin CLAPPERS				DATE SIGNED 15Feb77		19B. SIGNATURE OF APPROVING OFFICIAL <i>J. Halpin</i> J. Halpin CMS/13		DATE SIGNED 2-24-77		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODES NUMERIC ALPHABETIC	22. STATION CODE ALPHABETIC	23. INTEGRATE CODE	24. MOONERS CODE	25. DATE OF BIRTH MO DA YE	26. DATE OF GRADE MO DA YE	27. DATE OF LEI MO DA YE		
37	10	51500	LA	75013						
28. EFT EXPIRES MO DA YE		29. SPECIAL REFERENCE CODE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE	MO DA YE	33. SECURITY REG. NO 34. SCI			
					EOD DATA					
35. PAY PREFERENCE CODE 0-HOME 1-1 PT 2-10 PT		36. SERV COMP DATE MO DA YE	37. IDRS COMP DATE MO DA YE	38. CAREER CATEGORY LAB. STATE PROV. TERR.	39. HIGH HEALTH INSURANCE CODE 0-NONE 1-RET 2-BEN 3-BEN/OPT 4-INELIGIBLE	40. SOCIAL SECURITY NO CODE	41. STATE TAX DATA CODE			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO 1-BEFORE 2-BELOW 3-BELOW 10000 4-BELOW 10000 10000 10000 10000		42. LEAVE CAP CODE	43. FEDERAL TAX DATA FORM SECURED 1-YES 2-NO	44. STATE TAX DATA CODE 1-YES 2-NO	45. STATE TAX DATA CODE 1-YES 2-NO					
46. POSITION CONTROL CERTIFICATION 01 MAR 77 APPROVAL DATE APPROVED 2-24-77										
47. PREVIOUS EDITION 1152, USE PREVIOUS EDITION										
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1880-1881

REQUEST FOR PERSONNEL ACTION								DATE PREPARED 19 January 1977	
1. SERIAL NUMBER 036130 ✓		2. NAME (Last-First-Middle) Flores, Daniel							
3. NATURE OF PERSONNEL ACTION PROMOTION								4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 01 30 77	
5. FUNDS ➡		V 10 V		V 100		7. PAY AND NSCA 7135 45340000		8. CATEGORY OF EMPLOYMENT Regular	
9. ORGANIZATIONAL DESIGNATIONS DDO/LA Division ✓ Cuba Operations Group WII Area								10. LOCATION OF OFFICIAL STATION Washington, D.C.	
11. POSITION TITLE Operations Officer ✓ (13)								12. POSITION NUMBER CQ66 ✓	
14. CLASSIFICATION SCHEDULE (GS-LB. etc.) GS				15. OCCUPATIONAL SERIES 0136.01 ✓		16. GRADE AND STEP 13 1		17. SALARY OR RATE \$24,308	
18. REMARKS FROM: GS-12/4, \$22,485 <i>for 12/4</i>									
19A. SIGNATURE OF REQUESTING OFFICER John Malpin, CIVAPERS				DATE SIGNED 19 Jan 77		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>21 Jan 77</i>			
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S E C R E T  
EYES ONLY

20 OCT 1976

MEMORANDUM FOR: Chairman, GS-12 Evaluation Board  
FROM : Raymond A. Warren  
Chief, Latin America Division  
SUBJECT : Recommendation for Promotion to  
Grade GS-13, Daniel Flores

1. Mr. Daniel Flores was recently assigned to OTR as an operations instructor to capitalize on his fine operational record which he developed during his two field assignments in [redacted] and in [redacted] and his most recent operational assignment with LA/COG. His overall performance has clearly been characterized by exceptional proficiency and he has been rated by his most recent supervisor as "outstanding" for his handling of a sensitive [redacted] case and his development and pursuit of [redacted] operational leads. Mr. Flores has definite growth potential and clearly meets or exceeds the criteria for promotion to Grade GS-13, a promotion which is most strongly recommended.

2. During the past year Mr. Flores was responsible for handling a very sensitive and [redacted] asset. This asset is probably one of the "messiest and disorganized individuals" with whom a case officer in this Agency has had to contend. However, Mr. Flores clearly demonstrated his fine handling abilities in his manipulation and exploitation of this agent. As a result of his guidance and his ability to effectively debrief this person, Mr. Flores was able to make this asset one of our most productive [redacted] sources. During the last year this source [redacted] on subject matter which often commanded attention at the highest levels of our government.

3. Mr. Flores has shown a remarkable growth potential during the last year. He is determined, persistent, serious, and commendably aggressive. He is mature, self-assured, and his operational decisions are sound. His managerial skills are in keeping with his operational potential. He was often called

S E C R E T  
EYES ONLY

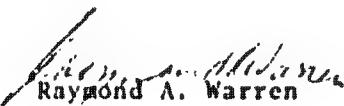
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S E C R E T  
EYES ONLY

upon in the last twelve months to act as Chief of his section, a GS-14 position. He demonstrated sound leadership qualities by stimulating interest and enthusiasm in his staff. His operational programs were aggressive and imaginative. Mr. Flores' supervisory talents combined with his excellent professional skills portend a continuing and successful career in this Agency.

4. While assigned to LA/COG, Mr. Flores was involved in the spotting, assessing, developing access to, and eventually pitching a [redacted] who was the [redacted] of [redacted] in a Latin American country. The recruitment pitch was not successful but the details of this operation were handled in the most professional manner. Mr. Flores developed more leads to [redacted] and [redacted] of [redacted] during this period than any other LA/COG operations officer. He has native fluency in Spanish and feels "at home" operating in the field. While in LA/COG Mr. Flores was called upon to do a considerable amount of TDY travel since he was on call to meet his [redacted] asset anytime, any place whenever the agent [redacted] of [redacted]. In addition to these travels, Mr. Flores did a lot of traveling seeking out and debriefing potential access agents. During this last year he clearly demonstrated his ability to function independently and to assume responsibilities usually reserved for officers much more senior in grade and experience.

5. Mr. Flores was assigned in July 1976 to OTR on a two-year rotational assignment as an operations instructor. Upon completion of this assignment, Mr. Flores will return to this Division to assume responsibilities, either at Headquarters or in the field, commensurate with his demonstrated operational and managerial talents. In recognition of Mr. Flores' outstanding agent handling skills, his overall professional competency, and his obvious growth potential, it is strongly recommended that Mr. Flores be promoted to Grade GS-13.

  
Raymond A. Warren

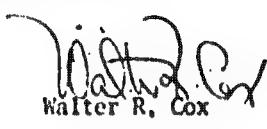
S E C R E T  
EYES ONLY

**SECRET**

21 September 1976

MEMORANDUM FOR: Chief, OTR/LTD  
FROM : Walter R. Cox  
Chief, ALT Unit  
SUBJECT : Completion of Training Report  
Trainee: Daniel Flores  
Training Program: [redacted]

1. For your information and for documentation in Daniel Flores' official personnel file, this memorandum certifies that he received the five-day SAI Persuasion Skills course at an NOCB [redacted] in Arlington, Virginia, between 11 and 17 August 1976. The instructor was Mr. [redacted]
2. Briefly, the SAI course is a program in human relations and communications effectiveness on the interpersonal level. It provides the trainee with a framework for analyzing problems usually encountered in supervisory or in agent development, recruitment, and handling situations and with a system for presenting his ideas in a way standing the best chance for success in gaining a target individual's willing acceptance. Flores was an active and most interested participant throughout the program and achieved a good understanding of the basic principles involved. A copy of his course critique is attached for your information.
3. Since Flores is an ALT Instructor, we plan to dispense with the formality of a post-training questionnaire.

  
Walter R. Cox

Originated by:



E-2 Impdet.  
Classified by 024097.

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CTR/ALT  
Staff

trained: Mr. Daniel Flores  
Instructor: Mr. [redacted]

August 1976 -

To assist us in making decisions about future SAI training or application, your answers to the following questions will be most appreciated.

1. Do you feel SAI training was helpful to you? (If you choose to do so, please explain why or how.) This course was extremely useful to me. One of the main features of the course — how to perceive the others persons objectives before your own — was of particular interest because, as an instructor it will be one of the main tools I will use in evaluating the level of understanding of each trainee. This experience will also be very helpful to me in my career as a case officer. I can think of several instances where SAI could have helped me turn several failures (recruitment pitches) into successes.

2. Did SAI training provide you with any concepts or tools which can be applied in a practical way to your work problems? To your personal life? Any examples you care to mention?

The benefits that this course will provide for me in my job as an instructor are clear. I am absolutely certain that putting the SAI concept into practice will bring forth not only self satisfaction but career benefits as well. This will also be very helpful to me in my personal life. I can see now that some of the concepts will be put to work immediately.

3. What elements, segments, or aspects of the SAI training were of the most interest or use to you?

The greatest revelation from an operational point of view, was the clarification of perhaps an erroneous idea we have about obtaining our intelligence objectives. I always operated under the belief that the most important thing in my work was to attain my objectives, i.e. the recruitment of an agent. SAI revealed that this is true but it also revealed that it is more important to first consider the target's (agent's) objectives. Once we do this our chances (in my opinion after taking SAI) of success would probably increase by at least 90 per cent. If I were to stress one point it would be that more emphasis be placed on dealing with the target's rather than the CO's objectives.

4. Would you recommend SAI training for other of our personnel?

I am sure that many people would be recommended for this training and that all would benefit from it. However, I would strongly recommend that personnel officers be given SAI as a prerequisite to their jobs. It would certainly help them in dealing with large numbers of different people.

5. What other components or categories of personnel do you believe would benefit from SAI training to a degree making it worthwhile for them to receive it?

6. Please comment, if you have any definite opinion, on the duration and pace of the training: too long/short? too fast/slow? The pace of the course was excellent. However, adding one or two more days would certainly help in putting the SAI concepts into practice by the trainee himself. That is, perhaps a live exercise with a person who is not aware of the training situation. A trainee could be tasked to elicit information from an unwitting participant. The use of videotapes and/or movies would help in testing the trainees perceptiveness through the course.

7. Any other comments you may wish to make:

A brief comment about the instructor. He was definitely responsible for the success of the course. Mr. [redacted] showed excellent knowledge of the SAI material and throughout the course kept the student's interest alive by showing tremendous enthusiasm in what he was teaching. The end result of the professionalism that Mr. [redacted] demonstrated in the class is reflected in the comments stated here and in the confidence he instilled in me personally.

8. On a scale of 1 to 5, how would you rate SAI training in relation to other training you have received from the Agency? Please encircle applicable number:

Non-Essential	Slightly Helpful	Generally Helpful	Very Helpful	Essential
1	2	3	4	5 X

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REQUEST FOR PERSONNEL ACTION								DATE PREPARED 25 June 1976		
1. SERIAL NUMBER		2. NAME (Last-First-Middle)								
036130		FLORES, Daniel ✓								
3. NATURE OF PERSONNEL ACTION Reassignment → Functional?								4. EFFECTIVE DATE REQUESTED		
								MONTH	DAY	YEAR
								06	21	76
5. FUNDS		V TO V	V TO CP	7. PAY AND INCRA		8. CATEGORY OF EMPLOYMENT				
		CP TO V	X CP TO CP	8175-3010 0000		Regular ✓				
9. ORGANIZATIONAL DESIGNATIONS DDA/OTR Functional Training Division Operations Training Branch								10. LOCATION OF OFFICER STATION Washington, D.C.		
11. POSITION TITLE Instructor-Ops (13)								12. POSITION NUMBER BD33		
14. CLASSIFICATION SCHEDULE (GS, LB, PW.) GS				13. OCCUPATIONAL SERIES 1712.32		16. GRADE AND STEP 12 3		17. SALARY OR RATE \$ 20678		
18. REMARKS CONCUR: <u>J. E. Fitzwater</u> LA/PERS Date acknowledge receipt of Category B/6 with follow payroll security								B D in NAT DQB 10 DXG		
18A. SIGNATURE OF REQUESTING OFFICIAL <u>J. E. Fitzwater</u>				DATE SIGNED 25 Jun 76		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <u>H. E. Fitzwater</u>		DATE SIGNED 25 Jun 76		
19. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
20. ACTION CODE 37		21. DEPLOY CODES Numerical		22. STATION CODE Alphabetic		23. INTEGRADE CODE		24. GRADE/STEP CODE		
10 10		17500 OTK 75113								
25. DTG EXPRES		26. SEPARATION CODE		27. DTG SEPARATION CODE		28. DTG SEPARATION CODE		29. DTG SEPARATION CODE		
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**REQUEST FOR PERSONNEL ACTION**

1 PREPARED

10 SEPTEMBER 1974

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13 Aug 2014 8:01

# **REQUEST FOR PERSONNEL ACTION**

DATI PREPARAZIONE

11 July 74

REQUEST FOR PERSONNEL ACTION

DATE PREPARED

11 July 74

1 SERIAL NUMBER 036130 ✓	2 NAME (Last-First-Middle) Flores, Daniel ✓	7 PAN AND NSCA 5 #135-4534	8 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 22 74	3 CATEGORY OF EMPLOYMENT Regular
4 NATURE OF PERSONNEL ACTION Reassignment		6 FUND SOURCE Funds	9 ORGANIZATIONAL DESIGNATIONS DDO/WH Division WH/COG Ops Support Branch	10 LOCATION OF OFFICIAL STATION Washington, D.C.
11 POSITION NUMBER Ops Officer (12)		12 POSITION NUMBER 1134	13 CAREER SERVICE DESIGNATION DQB	
14 CLASSIFICATION SCHEDULE (GS, F.B., etc.) GS		15 OCCUPATIONAL SERIES 0136.01	16 GRADE AND STEP 12 1	17 SALARY OR RATE \$ 17,497 ✓
18 REMARKS From [REDACTED] 57085 [REDACTED] * [REDACTED]				
19 SIGNATURE OF REQUESTING OFFICIAL H. L. Berthold, C/WH/PERS		DATE SIGNED 11 July 74	20 DATE SIGNED 7/19/74	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL				
21 VACATION CODE CODE 37 10	22 PAY CODES NUMBERIC 51500	23 STATION CODE ALPHABETIC CUCI 73012	24 INTENAL CODE CODE 1	25 MOITS CODE CODE MO DA YR MO DA YR
26 RTI EXPENSES MO DA YR	27 SPECIAL BILLING BILLING -1 -2 -3 -4	28 21ST PAYMENT DATA CODE 1000	29 SEPARATION BARB CODE TYPE MO DA YR	30 CORRECTION / CANCELLATION DATA CODE MO DA YR
31 WES PERIODS CODE 1-1 PM 1-10 PM	32 SEPV COMP DATE MO DA YR MO DA YR	33 LOBBY COMP DATE MO DA YR MO DA YR	34 LEADS DATE MO DA YR MO DA YR	35 REGUL/REGULAR EMPLOYEE CODE 1-1 PM 1-10 PM
36 PERIODS FOR 100% ALLOWANCE CODE 1-1 PM 1-10 PM	37 LEADS DATE CODE 1-1 PM 1-10 PM	38 REGUL/REGULAR EMPLOYEE CODE 1-1 PM 1-10 PM	39 STAFF PAY DATA CODE 1-1 PM 1-10 PM	40 SOCIAL SECURITY REG 80 100 80
41 PERIODS FOR 100% ALLOWANCE CODE 1-1 PM 1-10 PM	42 LEADS DATE CODE 1-1 PM 1-10 PM	43 REGUL/REGULAR EMPLOYEE CODE 1-1 PM 1-10 PM	44 STAFF PAY DATA CODE 1-1 PM 1-10 PM	45 DATE APPROVED 113 74
46 APPROVALS 05 7/19/74				

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(S) See Filed for

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SOCIAL SECURITY NUMBER	2. NAME (Last-First-Middle)					18 June 1974	
036130 ✓	FLORES DANIEL ✓						
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM						4. FUNCTION/DATE REQUESTED MONTH DAY YEAR 06 23 74	
6. RUMOS		V TO V	V TO O	7. PAY RATE CODE 413570YY		8. CATEGORY OF EMPLOYMENT REGULAR	
C TO V		X	O TO O	UOCO		9. LEGAL AUTHORITY (Completed by Office of Personnel) PL 82-643 SECT. 203	
9. ORGANIZATIONAL DESIGNATIONS  DDO/WH Division						10. LOCATION OF OFFICIAL STATION  [Redacted]	
11. POSITION TITLE						12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, E.B., etc.)			15. OCCUPATIONAL SERIES	16. GRADE AND STEP 12	17. SALARY OR RATE S		
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.							
19A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED	19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. ACTION CODE	21. EMPLOYEES	22. OFFICE CODE	23. STATION CODE	24. GRADE	25. DATE OF BIRTH	26. DATE OF GRACE	27. DATE OF END
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28. PAY EXPENS	29. SPECIAL	30. ESTIMATE DATA	31. APPROVAL CODE	32. APPROVAL DATE	33. CANCELLATION DATE	34. SECURITY	35. SALARIES
MO DA YR	CODE	CODE	CODE	CODE	MO DA YR	CODE	CODE
36. RETIREMENT	37. SEPARATE COOP DATE	38. LONG COOP DATE	39. CAREER CATEGORY	40. MEDICAL DISABILITY	41. MEDICAL DISABILITY	42. SOCIAL SECURITY NO	
CODE	MO DA YR	MO DA YR	CODE	CODE	CODE	CODE	
43. PENSION, LIFE AND GOVERNMENT WORK	44. LEAVE CAP	45. PENSION CAP	46. APPROVAL DATE	47. APPROVAL DATE	48. APPROVAL DATE	49. APPROVAL DATE	50. APPROVAL DATE
CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE
51. REASON FOR APPROVAL See memo signed by Officer dated 6/7/74							
52. APPROVAL FORM Date (1-74)							

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53. APPROVAL FORM  
Date (1-74)

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(When filled in)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER	2. NAME (Last-First-Middle)			19 NOVEMBER 1973	
030130	FLORES DANIEL				
3. NATURE OF PERSONNEL ACTION <b>PROMOTION</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>11 25 73</b>	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6. FUNDS	V TO V	V TO C		7. PAY AND NSCA 4135 1084 0000	8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS <b>DDO/WII DIVISION FOREIGN FIELD BR 3 - [REDACTED] STATION</b>				10. LOCATION OF OFFICIAL STATION [REDACTED]	
11. POSITION TITLE <b>OPS OFFICER</b>			12. POSITION NUMBER <b>(12) 0136</b>	13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, I.B., etc.) <b>GS</b>	15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>12 1</b>	17. SALARY OR RATE <b>\$ 17497</b>	
18. REMARKS From: GS-11.4 HOME BASE: WII					
19. ACTION CODE <b>22 10</b>			DATE SIGNED <b>19 Nov 73</b>	20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
21. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
22. EMPLOY. CODE	23. OFFICE CODING NUMERIC ALPHABETIC <b>51160 CEN D2085</b>	24. STATION CODE [REDACTED]	25. INITIATE CODE <b>3</b>	26. MOIS CODE MO DA YR <b>11 25 73</b>	27. DATE OF GRADE MO DA YR <b>11 25 73</b>
28. ETC EXPIRES MO. DA YR.	29. SPECIAL REFERENCE -X- -Y- -Z-	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE TYPE	32. COMBINATION/CANCELLATION DATA MO DA YR <b>EOD DATA</b>	33. SECURITY 220 80. 34. SOC. SEC. BD
35. VET PREFERENCE CODE 0-B08 1-1 PI 2-16 PT	36. SERV COMP. DATE MO DA YR [REDACTED]	37. LONG COMP. DATE MO DA YR [REDACTED]	38. CAREER CATEGORY CODE CAB/BEST PBST/TIMB	39. MED/HEALTH INSURANCE CODE -W-118 -111/107 -111/1481	40. SOCIAL SECURITY BD [REDACTED]
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-60 PREVIOUS SERVICE 1-90 YEARS IN SERVICE 2-100 OR MORE (LESS THAN 3 YEARS) 3-100 OR MORE (MORE THAN 3 YEARS)	42. LEAVE ACT. CODE [REDACTED]	43. FEDERAL TAX DATA FORM EXECUTED CODE 1-Y15 2-B0	44. STATE TAX DATA FORM EXECUTED 1-Y15 2-B0	45. DO APPROVAL 14.01.1973	46. DATE APPROVED 23 NOV 73
47. POSITION CONTROL CERTIFICATION 1.23.73 39 NOV 1973			48. DATE APPROVED 23 NOV 73		
49. USE PREVIOUS EDITION					

SECRET

CLASSIFIED BY 01-0111

101  
AFDAS

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED		
1. SERIAL NUMBER 036130	2. NAME (Last-First-Middle) FLORES, DANIEL					23 Nov 71		
3. NATURE OF PERSONNEL ACTION PROMOTION						4. EFFECTIVE DATE REQUESTED MONTH 11 DAY 28 YEAR 71	5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS D.P. →	V TO V CP TO V		V TO G X CP TO G		7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084	8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DDP/WH Division FOREIGN FIELD BRANCH 3 - STATION						10. LOCATION OF OFFICIAL STATION [Redacted]		
11. POSITION TITLE OPS OFFICER (12)						12. POSITION NUMBER 0136	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS			15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 11 3	17. SALARY OR RATE \$ 13,457			
18. REMARKS From GS 10 3 [Redacted]								
19A. SIGNATURE OR RECOMMENDING OFFICER			DATE SIGNED 23 Nov 71	19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 11/25/71		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
20. ACTION CODE 72	20. EMPLOY CODE 10	21. OFFICE CODING PHONETIC ALPHABETIC 51760 WH 57035	22. STATION CODE 57035	23. INTEGRIS CODE 3	24. MOBILES CODE 3	25. DATE OF BIRTH MO. DA. YE. 11.25.71	26. DATE OF GRADE MO. DA. YE. 11.25.71	27. DATE OF LEI MO. DA. YE. 11.25.71
28. RITE EXPIRES NO. DA. YE.		29. SPECIAL REFERENCE 1-EX 2-OSR 3-TIA 4-BRS	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CONNECTION/CANCELLATION DATA TYPE EOD DATA	33. SECURITY REG. NO	34. SEX	
35. RET PREFERENCE CODE 0-60 1-12 2-18 3-30		36. SEFT COMP DATE MO. DA. YE.	37. LOSS COMP DATE MO. DA. YE.	38. CAREER CATEGORY CAB-RES/POLY-TRIP	39. FEGL/HEALTH INSURANCE CODE	40. HEALTH INS. CODE	42. SOCIAL SECURITY NO	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-60 PERIODS SERVICE 1-60 YEARS IN SERVICE 2-60% OF SERVICE (LESS THAN 3 YEARS) 3-60% OF SERVICE (OVER THREE 3 YEARS)		42. LEAVE CAT CODE	43. FEDERAL TAX DATA NUMBER EXECUTED 1-YES 2-NO	44. STATE TAX DATA NUMBER EXECUTED 1-YES 2-NO	45. NO TAX EXEMPTION CODE	46. NO TAX STATE CODE EXEMPT		
47. POSITION CONTROL CERTIFICATION 11-26-71						48. O.P. APPROVAL [Redacted]	DATE APPROVED 11/25/71	

200-1152 USE PREVIOUS EDITION

SECRET

G-100-1  
ESTIMATED TIME ALLOCATION APPROXIMATELY  
600 DECISIONS/HOUR

141

SECRET  
(When Filled In)

FILE  
PUNCHED

BY

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL. NO.	NAME		
1-8	LAST (Print)	FIRST	MIDDLE
036130	FLORES	DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 6 - CANCELLATION	37	38	39
09	24	71				/			570

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39
									60-62

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

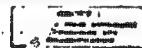
TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. 178740 DOCUMENT DATE/PERIOD 9/10/71

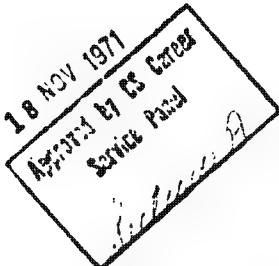
REMARKS

PREPARED BY DCO	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
E.O.L. DIVISION CYTB IC & T DIVISION	DATE 9/10/71	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



**SECRET**  
**EYES ONLY**



17 AUG 1971

MEMORANDUM FOR: Secretary, CSCS Panel A  
SUBJECT : Recommendation for Promotion to Grade  
GS-11, Daniel Flores

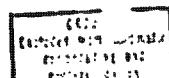
1. It is recommended that Mr. Daniel Flores be promoted from GS-10 to GS-11.

2. Mr. Flores is 36 years old and joined the Agency in March 1962. He has successively been a file clerk, translator, intelligence assistant, career trainee and operations officer. He worked part time for several years so that he could obtain his BA degree from American University. This he did in 1967 with his specialty being Latin American Affairs.

3. Mr. Flores, who is bilingual in English and Spanish, has just completed his first overseas tour as an operations officer in [redacted]. It is on the basis of his very fine performance during this tour that this promotion request is based. Also as a result of his record in [redacted] he has been assigned to [redacted] Station as an operations officer in a position which is rated as GS-13.

4. The Chief of Base, [redacted] and the Chief of Station, [redacted] both have rated Mr. Flores as "Strong" in his fitness reports and both have stated that his performance in [redacted] merited a Quality Step Increase. This QSI request is currently being processed and is based on the outstanding job Mr. Flores did in connection with a very sensitive [redacted] operation. He planned the [redacted] aspects, supervised the installation, located the [redacted] recruited the [redacted] and processed all the intelligence which was produced. The intelligence derived from this source has been of consistently high quality and the operation has been described by the Chief of Station, [redacted] as the best and most productive of all the operations in [redacted]. Throughout all aspects of the operation, Mr. Flores maintained tight control on its security and avoided any problems in this respect.

**SECRET**  
**EYES ONLY**



**SECRET  
EYES ONLY**

-2-

S. By his performance in [redacted] Mr. Flores has demonstrated that he has found his proper role as an operations officer and that he has potential for growth in this area of endeavor. WH Division strongly recommends that he be promoted to GS-11.

*James E. Glavin*  
William "Brog" Glavin  
Chief  
Western Hemisphere Division

**SECRET  
EYES ONLY**

## SECRET

(If less than 14)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 7 September 1971				
1. SERIAL NUMBER 036130	2. NAME (Last-First-Middle) FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 14 71	5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS ➡	V TO V CP TO V	V TO CP X CP TO CP	7. FINANCIAL ANALYSIS NO CHARGEABLE 2135 1084	8. LEGAL AUTHORITY (Completed by Office of Personnel)				
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 STATION			10. LOCATION OF OFFICIAL STATION [Redacted]					
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0136	13. CAREER SERVICE DESIGNATION D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 10 3	17. SALARY OR RATE \$ 12285				
18. REMARKS From DDP/WH #0376 Vice [Redacted] Approved 259a attached.  HB:WH								
From 259a: Mr. Flores' Spanish capabilities are native reading and high speaking which more than meet the language requirements of intermediate reading and speaking for the Station.								
18A. SIGNATURE OF REQUESTING OFFICIAL Henry L. Berthold, C/WH/Pers		DATE SIGNED 9/13/71	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 11/17/71			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE 37 10	20. EMPLOY CODE 5100	21. OFFICE CODING NUMERIC 66045	22. STATION CODE ALPHABETIC S7045	23. CITIZEN CODE [Redacted]	24. HIRING CODE 3	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
20. RTE EXPIRES XX XXX XX	29. SPECIAL REFERENCE T-CSC -OAR -FCS -DSC	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE CODE	32. CORRECTION, CANCELLATION DATA TYPE CODE	33. EOD DATA CODE	34. SECURITY REG. BD CODE	35. SEX CODE	
33. VET PREFERENCE CODE 0-000 1-0 PT 2-10 PT	36. SERV COMB DATE MO DA YR	37. LONG COMB DATE MO DA YR	38. CARRIER CATEGORY CODE FAM 000 PROF 000	39. HIGH HEALTH INSURANCE CODE 0-WIFE 1-SPO 2-BIG-OFF 3-RELATIVE	40. SOCIAL SECURITY BD CODE			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-00 PROVIDED SERVICE 1-00 ARMED FORCES 2-00 AIR FORCE (100% PAY 2 PAY 2 PAY 2) 3-00 ARMY (100% PAY 2 PAY 2 PAY 2) 4-00 NAVY (100% PAY 2 PAY 2 PAY 2)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE 1-001 2-00	44. STATE TAX DATA CODE 1-001 2-00	45. STATE TAX DATA CODE 1-001 2-00	46. O.P. APPROVAL CODE	47. DATE APPROVED 11/17/71		
48. POSITION CONTROL CERTIFICATION [Redacted]								
49. USE PREVIOUS FORM 1152								

SECRET

101  
EX-100 FORM 1152-1, APPROVED  
10 SEPTEMBER 1970

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED 21 JULY 1970	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLORES, DANIEL					
3 NATURE OF PERSONNEL ACTION PROMOTION				4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 26 70	5 CATEGORY OF EMPLOYMENT REGULAR	
6 FUNDS ►	V TO V		V TO CP	7 FINANCIAL ANALYSIS NO CHARGEABLE 1135 0884		8 LEGAL AUTHORITY (Completed by Office of Personnel)
9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3 STATION BASE				10 LOCATION OF OFFICIAL STATION _____		
11 POSITION TITLE OPS OFFICER (09)				12 POSITION NUMBER 0376	13 CAREER SERVICE DESIGNATION D	
14 CLASSIFICATION SCHEDULE (GS, F.B., etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 10 2	17 SALARY OR RATE \$ 10539 //,23/	
18 REMARKS * PRA NTE TWO YEARS IN ACCORDANCE WITH HR 20-17d(1)(a). FORMERLY A GS-9-3, \$10539.						
18A SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD			DATE SIGNED 21 July 1970		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICIAL H. H. H.	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE 1000	20 EMPLOY CODE 1000	21 OFFICE CODES NUMBER ALPHABETIC CODE 1000	22 STATUS CODE 1000	23 ANNUAL CODE 1000	24 GRADE CODE 1000	25 DATE OF BIRTH YEAR MONTH DAY 1000
7.2 10 51230 1111 1955	81			3		
26 ERI REPORTS 1000	27 SECTION REFERENCE 1000	28 SEPARATION DATA 1000	29 SEPARATION DATA CODE 1000	30 CORRECTED PAYROLL/STATCH DATA 1000	31 MGR-IT CODE 1000	32 DATE OF DEATH YEAR MONTH DAY 1000
7.2 10 51230 1111 1955	81				30 1000 1111 1955	
33 PAY PERIOD 1000	34 MGR (1000) 1000	35 1000 1000 1000	36 1000 1000 1000	37 1000 1000 1000	38 1000 1000 1000	39 1000 1000 1000
0 0000 0-1-A 0-2-B	0 0000 0-1-A 0-2-B	0 0000 0-1-A 0-2-B	0 0000 0-1-A 0-2-B	0 0000 0-1-A 0-2-B	0 0000 0-1-A 0-2-B	0 0000 0-1-A 0-2-B
40 0000 0-1-A 0-2-B	41 0000 0-1-A 0-2-B	42 0000 0-1-A 0-2-B	43 0000 0-1-A 0-2-B	44 0000 0-1-A 0-2-B	45 0000 0-1-A 0-2-B	46 0000 0-1-A 0-2-B
47 0000 0-1-A 0-2-B	48 0000 0-1-A 0-2-B	49 0000 0-1-A 0-2-B	50 0000 0-1-A 0-2-B	51 0000 0-1-A 0-2-B	52 0000 0-1-A 0-2-B	53 0000 0-1-A 0-2-B
54 0000 0-1-A 0-2-B	55 0000 0-1-A 0-2-B	56 0000 0-1-A 0-2-B	57 0000 0-1-A 0-2-B	58 0000 0-1-A 0-2-B	59 0000 0-1-A 0-2-B	60 0000 0-1-A 0-2-B
61 PAYROLL CONTROL NUMBER 1000	62 1000 1000 1000	63 1000 1000 1000	64 1000 1000 1000	65 1000 1000 1000	66 1000 1000 1000	67 1000 1000 1000
68 PAYROLL CONTROL NUMBER 1000	69 1000 1000 1000	70 1000 1000 1000	71 1000 1000 1000	72 1000 1000 1000	73 1000 1000 1000	74 1000 1000 1000
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82 PAYROLL CONTROL NUMBER 1000	83 1000 1000 1000	84 1000 1000 1000	85 1000 1000 1000	86 1000 1000 1000	87 1000 1000 1000	88 1000 1000 1000
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131 PAYROLL CONTROL NUMBER 1000	132 1000 1000 1000	133 1000 1000 1000	134 1000 1000 1000	135 1000 1000 1000	136 1000 1000 1000	137 1000 1000 1000
138 PAYROLL CONTROL NUMBER 1000	139 1000 1000 1000	140 1000 1000 1000	141 1000 1000 1000	142 1000 1000 1000	143 1000 1000 1000	144 1000 1000 1000
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460 PAYROLL CONTROL NUMBER 1000	461 1000 1000 1000	462 1000 1000 1000	463 1000 1000 1000	464 1000 1000 1000</td		

S E C R E T  
EYES ONLY

APPENDIX 1, GS Career  
Science Panel  
27

2 JUN 1970

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

SUBJECT : Recommendation for Promotion to Grade  
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-9 to GS-10. Mr. Flores has been in his present grade since April 1969.

2. Mr. Flores joined the Agency in 1962. Initially he was employed on a part-time basis in the WH Division while attending American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the WH Division, he was selected for assignment as an operations officer at the [redacted] Base, where he arrived in May 1969.

3. Mr. Flores has made a most impressive beginning in [redacted]. He has adapted to new tasks and a new environment with a mature assurance and a professional approach. Shortly after arrival in [redacted] the Base was temporarily depleted of other officers. Mr. Flores carried out the duties of acting Chief of Base in a most commendable manner. His fluency in Spanish and his Latin background have been definite assets in the performance of his duties. His performance to date has demonstrated that he handles his agents securely and productively. Both Mr. Flores and his wife have been well accepted within the local community and they carry out their representational duties very effectively.

4. Mr. Flores has proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level higher than his present grade and a promotion at this time is strongly recommended.

*William V. Broe*  
William V. Broe  
Chief  
Western Hemisphere Division

S E C R E T  
EYES ONLY

DISPATCH		OPERATIONS INTELLIGENCE S E C R E T	INFO. REQ'D.
1203	Chief, WI Division		INFO. REQ'D.
1204	Chief of Station, [redacted]	1	INFO. REQ'D.
1204	Chief of Base, [redacted]		INFO. REQ'D.
SUBJ:	ADMINISTRATIVE/PROMOTION - Promotion for [redacted] [redacted] [redacted] [redacted]		
ACTION REQUIRED: See Below		<div style="border: 1px solid black; padding: 5px; display: inline-block;">           Approved by CS Career            Service Panel  <b>17 JUL 1970</b> </div> <span style="margin-left: 20px;">[Signature]</span>	
<p>During the visit of the Chief, WID to the Base last November 1969 he mentioned to the COS, [redacted] and the COB that the promotion for [redacted] (from GS-9 to GS-10) would be forthcoming; he also said this to [redacted] during a private meeting. Thus far, however, there has been no notice of the promotion action. The COB assumes that the delay is related in some way to the dates set for meeting of the promotion panel for [redacted] grade. If this assumption is not correct, however, and some further action by the Base is necessary in addition to the recommendation contained in [redacted] last Fitness Report, the COB would appreciate being advised.</p> <p style="text-align: right;">[Signature]</p> <p style="text-align: right;">/S/ [redacted]</p>			
Distribution: Orig. & 2 - C/WID 2 - COS, [redacted]			
REFERENCE TO DISPATCH NUMBER AND DATE HEITT-1074 COSMETIC RYCAT		DATE 26 May 1970 RECORDED	
S E C R E T			

SECRET

(Do Not Fill In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED		
1. SERIAL NUMBER	2. NAME (Last-First-Middle)					9 APRIL 1969		
036130	FLORES, DANIEL							
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE REQUESTED		
						MONTH	DAY	YEAR
						04	10	69
5. RANKS		V TO V		V TO C	6. FINANCIAL ANALYSIS NO CHAROABLE			
		C TO V	X	C TO C	7. FINANCIAL ANALYSIS NO CHAROABLE			
8. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 3						9. LOCATION OF OFFICIAL STATION		
STATION						BOSC		
10. POSITION TITLE						11. POSITION NUMBER		
OPS OFFICER						(09) 0378		
12. OCCUPATIONAL SERIES			13. CAREER SERVICE DESIGNATION			D		
GS			14. CLASSIFICATION SCHEDULE (G.S., E.R., etc.)			15. GRADE AND STEP		
0136.01						C9 2		
16. SALARY OR RATE \$ 8744 ✓								
17. REMARKS <u>All SICK AND <del>AC</del> HOURS ANNUAL LEAVE TO BE TRANSFERRED TO THE</u>								
18. MARITAL STATUS: MARRIED								
19. ACTION CODE				20. EMPLOY CODE		21. OFFICE CODING		
55/10				51700		104 1953-9		
22. STATION CODE				23. INTEGEE CODE		24. MOOTPS CODE		
NUMBERIC				ALPHABETIC		MO DA 14		
3						MO DA 14		
25. RPT. PERIOD				26. SEBY COMP. DATE		27. LONG COMP. DATE		
MO. DA 10				MO. DA 10		MO. DA 10		
28. CARRIER CATEGORY				29. FEGLI HEALTH INSURANCE		30. SOCIALE SECURITY NO		
CODE				CODE		CODE		
0- HOME 1- S PT 2- 10 PT				0- HOME 1- S PT 2- 10 PT		0- HOME 1- S PT 2- 10 PT		
31. PREVIOUS AFFILIATE GOVERNMENT SERVICE				32. LEAVE CAT		33. FEDERAL TAX DATA		
CODE				CODE		CODE		
0- NO PREVIOUS SERVICE 1- NO DATES OF SERVICE 2- RECENTLY SERVED (LESS THAN 3 YEARS) 3- RECENTLY SERVED (MORE THAN 3 YEARS)				1- RIS 2- RIS		0- NO TAX EXEMPTIONS 1- RIS 2- RIS		
34. POSITION CONTROL CERTIFICATION				35. O.P. APPROVAL		36. DATE APPROVED		

DRAFT 1152 USE PREVIOUS EDITION

SECRET

DRAFT 1152  
101-1000-00000-00  
000 00000 000 00

## SECRET

(U when filled in)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
						3 April 1969	
1 SERIAL NUMBER	2 NAME (First-Middle-Last)					DATE PREPARED	
036130	FLORES, DANIEL					3 April 1969	
4 NATURE OF PERSONNEL ACTION		5 EFFECTIVE DATE REQUESTED		6 CATEGORY OF EMPLOYMENT			
PROMOTION, TRANSFER TO NEW FUNDS, AND CHANGE OF SERVICE DESIGNATION		MONTH DAY YEAR 04 06 69		REGULAR			
6 FUNDS		V TO V	X V TO CP	7 FINANCIAL ANALYSIS NO CHARGEABLE 9135 0884		8 LEGAL AUTHORITY (Completed by Office of Personnel)	
CP TO V		CP TO CP					
9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 03				10 LOCATION OF OFFICIAL STATION			
STATION BASE							
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER (09)	13 CAREER SERVICE DESIGNATION D		
14 CLASSIFICATION SCHEDULE (GS, LS, WH)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP 09 2	17 SALARY OR RATE \$ 8744		
18 REMARKS APPROVED 259a ATTACHED.							
FROM: DDP/WH/Branch 4/Pos. 1441. GS-08, step 2, \$7956/annum.				CONCUR:			
I CONCUR IN CHANGE OF SERVICE DESIGNATION FROM SJ TO D: <i>(Signed on original)</i>				OTR/PERS <i>3 Apr 69</i>			
18A SIGNATURE OF REQUESTING OFFICIAL HENRY E. BERTHOLD			DATE SIGNED 3 APR 69		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 4 APR 1969
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE 20	20 EMPLOY CODE 10	21 OFFICE CODING NUMBER ALPHABETIC 51703 WH A559	22 STATION CODE CODE	23 INTERIOR CODE 3	24 MOOTPS CODE MO DA VS	25 DATE OF BIRTH MO DA VS	26 DATE OF GRADE MO DA VS 04106 67 04106 67
20 RITE EXPIRES NO DA VS	20 SPECIAL REFERENCE 1-1 P 2-10 P 3-10 P	21 RETIREMENT DATA CODE	22	23 SEPARATION DATA CODE TYPE 3	24 CANCELLATION DATA CODE MO DA VS	25	26 SECURITY REG RD REG RD
27 RET PREFERENCE CODE 0-ROSS 1-1 PT 2-10 PT	28 LAST COMP DATE MO DA VS	29 LAST COMP DATE MO DA VS	30 CAREER CATEGORY CODE 000000	31 FEAL HEALTH INSURANCE CODE 0-UNINS 1-VES	32 STATE TAX DATA CODE 0-000	33 SOCIAL SECURITY ID CODE	34
35 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0- NO PREVIOUS SERVICE 1- CIVIL OR MILITARY 2- CIVIL OR MILITARY (LESS THAN 3 YEARS) 3- MILITARY SERVICE (MORE THAN 3 YEARS)	36 LEARN CAT CODE	37	38 FEDERAL TAX DATA CODE	39 STATE TAX DATA CODE 0-000	40	41	42
43 POSITION CONTROL CERTIFICATION 37	44 O.P. APPROVAL CIVIL OR MILITARY DATA	45	46 O.P. APPROVAL DATA	47	48	49	50
51 PREVIOUS EDITION 3-67 1152 150 PREVIOUS EDITION							

SECRET

REF ID: A6547

14

## SECRET

DATE PREPARED

23 SEPTEMBER 1968

REQUEST FOR PERSONNEL ACTION				
1. SERIAL NUMBER 036130	2. NAME (Last-First-Middle) FLORES, DANIEL			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 10 06 68	5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS ► XX Y10V CP10V	Y10C CP10C	7. FINANCIAL ANALYSIS NO CHARGEABLE 9235 0620		
8. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 4 SECTION		9. LOCATION OF OFFICIAL STATION WASH., D. C.		
10. POSITION TITLE Ops Officer X CAREER TRAINING		11. POSITION NUMBER 1441	12. CAREER SERVICE DESIGNATION S SJ	
13. CLASSIFICATION SCHEDULE (GS, E.B. etc.) GS	14. OCCUPATIONAL SERIES 0136.01 XG99DXXXX	15. GRADE AND STEP 08 2	16. SALARY OR RATE \$ 7,956	
17. REMARKS FROM: DDS/OTR/CAREER TRAINING PROGRAM/0748  CONCUR: 1 - Finance 1 - Security HENRY L. BERTHOLD C/WH/PERSONNEL				
18. SIGNATURE OF REQUESTING OFFICER HENRY L. BERTHOLD C/WH/PERSONNEL		DATE SIGNED 24 SEP 68	MOVING OFFICER C/CTP	DATE SIGNED
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL				
19. ACTION CODE 37	20. EMPLOYEE CODE 10	21. OFFICE CODES NUMERIC ALPHABETIC 37 10 651450 6514	22. STATION CODE CODE	23. INTERAGENCY CODE CODE
24. RIF EXPIRES NO DA TO	25. SPECIAL REFERENCE 1-EX 2-DRM 3-FCA 4-POL	26. RETIREMENT DATA CODE	27. SEPARATION DATA CODE CODE	28. CORRECTION CANCELLATION DATA TYPE EOD DATA →
29. RIF PERIOD CODE 0-000 1-1 FT 2-10 FT	30. SERV COMB DATE NO DA TO	31. LONG COMB DATE NO DA TO	32. CARRIER CATEGORY LAD BSD PROG TRP CODE	33. FEDERAL HEALTH INSURANCE CODE 0-000 1-100 2-1000
34. SOCIAL SECURITY NO. 000-00-0000	35. STATE TAX DATA CODE	36. STATE TAX DATA CODE	37. FEDERAL TAX DATA CODE	38. STATE TAX DATA CODE
39. LEAVE CAT CODE 0-00 PENTUS SWING 1-00 6000 IN WART 2-0000 6000 (NOT LESS THAN 3 YEARS) 3-0000 6000 (NOT LESS THAN 3 YEARS)	40. FEDERAL TAX DATA CODE 1-100 2-200	41. NO TAX EXEMPTIONS CODE	42. STATE TAX DATA CODE 1-100 2-200	43. NO TAX EXEMPTIONS CODE
44. APPROVAL DATE A 11/11/68	45. APPROVAL DATE B 11/11/68	46. APPROVAL DATE C 11/11/68	47. APPROVAL DATE D 11/11/68	48. APPROVAL DATE E 11/11/68
49. POSITION CONTROL CERTIFICATION DANIEL CTP				

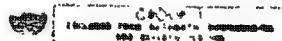
SECRET

100% Reclaimed Wood

REQUEST FOR PERSONNEL ACTION								DATE PREPARED 11 June 68			
1. SERIAL NUMBER 136130		2. NAME (Last-First-Middle) MLORES, Daniel									
3. NATURE OF PERSONNEL ACTION PROMOTION								4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 10 68			
5. FUNDS →		XX	V TO V		V TO C			6. FINANCIAL ANALYSIS NO. CHARGEABLE 8275 2100			
7. ORGANIZATIONAL DESIGNATIONS DIX/OTR CAREER TRAINING PROGRAM								8. LEGAL AUTHORITY (Completed by Office of Personnel) REGULAR			
9. POSITION TITLE CAREER TRAINEE								10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.			
11. POSITION NUMBER 0743								12. CAREER SERVICE DESIGNATION SJ			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS				15. OCCUPATIONAL SERIES 0060.01		16. GRADE AND STEP 08 2		17. SALARY OR RATE \$ 7630			
18. REMARKS											
18A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER C/CTP				DATE SIGNED 6/13/68	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODES NUMERIC 08300	22. STATION CODE ALPHABETIC CTP	23. INTEGRISE CODE 75213	24. RODS/RS CODE /	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. 24% OF LSI MO DA YR	28. SECURITY REQ'D SAC REC'D MO DA YR		
20. BFT EXPENSES MO. DA YR.	29. SPECIAL REFERENCES - CSC - GSRA - GEA - WRC	30. SETTLEMENT DATA CODE	31. SEPARATION DATA CODE TYPE	32. CORRECTION/CANCELLATION DATA TYPE	33. SECURITY REQ'D SAC REC'D MO DA YR						
35. RET PREFERENCE CODE 0-REG 1-1 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE REG TEMP	39. FEDERAL HEALTH INSURANCE CODE 0-REG 1-VIS 2-HB	40. STATE/LOCAL SECURITY REQ'D CODE 0-REG 1-VIS 2-HB						
41. PERIODS OF PLEASANT GOVERNMENT SERVICE CODE 0-00 PLEASANT SERVICE 1-00 REGLES & SUPPORT 2-00 REGLES & SUPPORT (THIS PLEASANT PERIOD) 3-00 REGLES & SUPPORT (REGLES THIS PLEASANT PERIOD)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE REG TEMP	44. STATE TAX DATA CODE REG TEMP								
45. POSITION CONTROL CERTIFICATION PC- 6 13 68	46. O.P. APPROVAL DATE APPROVED 6/13/68										

1-200 1152 100 PREVIOUS NUMBER  
3-67

. SECRET



## SECRET

(If Area Filled In)

REQUEST FOR PERSONNEL ACTION							DATE PREPARED
1 SERIAL NUMBER	2 NAME (Last-First-Middle)						26 November 1967
036130	FLORES, Daniel						
3 NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION							4 EFFECTIVE DATE REQUESTED
							MONTH DAY YEAR 12 22 67
5 FUNDS	XX	V TO V		V TO O	6 FINANCIAL ANALYSIS NO CHARGEABLE 8275 2100		
					7 LEGAL AUTHORITY (Completed by Office of Personnel)		
9 ORGANIZATIONAL DESIGNATIONS DDS/OTR CAREER TRAINING PROGRAM							10 LOCATION OF OFFICIAL STATION WASHINGTON, D.C.
11 POSITION TITLE CAREER TRAINEE							12 POSITION NUMBER 0748
14 CLASSIFICATION SCHEDULE (G.S. L.B. etc.) GS			15 OCCUPATIONAL SERIES 0090.31	16 GRADE AND STEP 07 2	17 SALARY OR RATE \$ 5837 6664 6,959		
18 REMARKS  From: DDP/WH/COG/Intelligence Branch/Operations Support Section, #1174. Subject has concurred in Change of Service Designation from D to SJ.							
CONCUR: <u>Henry L. Berthold</u> Henry L. Berthold Chief, WH Personnel							
18A SIGNATURE OF REQUESTING OFFICIAL Robert B. Freeman, C/CTP				DATE SIGNED	18B		
				18A	18B		
18C							
19 ACTION CODE 20 EMPLOY CODE 21 OFFICE CODING 22 STATION CODE 23 INTELLIGENCE CODE 24 MOODERS CODE 25 DATE OF BIRTH 26 DATE OF GRADS 27 DATE OF LEI							
22	10	21 P-300 CTP	22 75013	23	24	25	26
NO. DA. 10		20 SPECIAL REFERENCE 1-CYC 2-OTR 3-TRC	21 RETIREMENT DATA CODE	22 SEPARATION DATA CODE TYPE	23 CANCELLATION DATA TYPE	24 EOD DATA	25 SECURITY REG. NO. 34 SEC
27							
28 PAY PREFERENCE 29 PAY COMB DATE 30 LONG COMB DATE 31 CAREER CATEGORY 32 FEGL HEALTH INSURANCE 48 SOCIAL SECURITY NO							
CODE	0-BORN 1-1 PT 2-10 PT	=0 DA YR =0 DA YR =0 DA YR	=0 DA YR =0 DA YR =0 DA YR	COMB PAY REG. TYPE	CODE	CODE 0-BORN 1-VIS	HEALTH INS. CODE
40 PAYMENT (INITIAL AUTHORITY) SERVICE 41 STATE TAX DATA 42 STATE TAX DATA							
CODE	0-NO PAYMENT 1-NO PAYMENT 2-INITIAL AUTHORITY 3-INITIAL AUTHORITY, MADE MORE 3 PAYMENTS	(200)	STATE TAX DATA CODE	NO TAX EXEMPTIONS CODE	STATE TAX DATA CODE	NO TAX EXEMPTIONS CODE	STATE TAX CODE CODE
43 POSITION CONTROL CERTIFICATION  Ref 13-3-13							
44 O.P APPROVALS				45 APPROVED			
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~~CONFIDENTIAL~~

26 October 1967

MEMORANDUM FOR: Daniel Flores

THROUGH : Executive Secretary  
CSCT Selection Board  
SUBJECT : Application for Career Training Program

1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.
2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.
3. Should you have any further questions, do not hesitate to call on the Program Officers.

**ROBERT B. FREEMAN**  
Chief, CTP

~~CONFIDENTIAL~~



**SECRET**

18 *Enclosed*

REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1 SERIAL NUMBER	2 NAME (Last-First-Middle)							3, August 1967	
036130	FLORES DANIEL								
4 NATURE OF PERSONNEL ACTION PROOTION & PAY ADJUSTMENT TO FULL TIME (A.A.C. (CORRECTION) <i>(Coil Bldg.)</i> )								5 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 01 07 67	
6 FUNDS		X	V TO V	V TO C	7 FINANCIAL ANALYSIS NO. CHARGEABLE 8235 0620			8 CATEGORY OF EMPLOYMENT REGULAR	
9 ORGANIZATIONAL DESIGNATIONS DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION <i>(CPI RATIONS)</i>								10 LOCATION OF OFFICIAL STATION WASH., D. C.	
11 POSITION TITLE INTELLIGENCE ASST								12 POSITION NUMBER 1174	13 CAREER SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (G.S., F.B., I.A.) GS				15 OCCUPATIONAL SERIES 0301.28				16 GRADE AND STEP 06 3	17 SALARY OR RATE S 6263.
18 REMARKS  <u>FINANCIAL ANALYSIS NO. (#7) TO READ: 8235-0620</u>									
19 SIGNATURE OF PERSONNEL REQUESTING Henry L. Berthold C/WI/PERS				20 DATE SIGNED 8/1/67		21 SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>5 Sept 1967</i>			
22 SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
23 ACTORS		24 EMPLOYEES		25 STATION		26 WORKERS		27 WORKERS	
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(U) Not Valid To)

REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1. SERIAL NUMBER	2. NAME (Last-First-Middle)							22 June 1967	
036130	FLORES DANIEL								
3. NATURE OF PERSONNEL ACTION <b>PROMOTION + Pay Adjustment to Full Time</b>								4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>07 30 67</b>	
5. FUNDS		X	V TO V		V TO CP			6. FINANCIAL ANALYSIS NO CHARGEABLE <b>8235 1162</b>	
7. ORGANIZATIONAL DESIGNATIONS <b>DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION</b>								8. CATEGORY OF EMPLOYMENT <b>REGULAR PART-TIME</b>	
9. LOCATION OF OFFICIAL STATION <b>WASH., D.C.</b>								10. LEGAL AUTHORITY (Completed by Office of Personnel)	
11. POSITION TITLE <b>INTELLIGENCE CLERK ASST (7)</b>								12. POSITION NUMBER <b>1174</b>	
14. CLASSIFICATION SCHEDULE (GS, E.B. etc.)				15. OCCUPATIONAL SERIES				16. GRADE AND STEP <b>06 3 ✓</b>	
GS				0301.28				17. SALARY OR RATE <b>\$ 6263. ✓</b>	
18. REMARKS  Subject is returning to full-time duty on <b>30 July 1967.</b> Subject will graduate from Georgetown Univ. this month.  <i>C 1</i>									
C/WH/Pets				DATE SIGNED <b>28 June</b>		19. SIGNATURE OF CAREER SERVICE REPRESENTATIVE/CARRIER  <i>C 1</i>			
20. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
20. ACTION	20. EMPLOY CODE	21. OFFICE CODE	22. STATION CODE	23. ATTACHE CODE	24. MOONS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF END	
CODE	CODE	CODE	CODE	CODE	CODE	MM DD YY	MM DD YY	MM DD YY	
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20. END DATES	20. SPECIAL REFERENCES	20. EQUIPMENT DATA	21. SEPARATION DATA	22. CORRECTION CANCELLATION DATA					
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23. PAY PERIOD	24. MAX LOAD DATA	25. LOAD LOAD DATA	26. LOAD LOAD DATA	27. PAYLOAD PAYLOAD	28. PAYLOAD PAYLOAD	29. PAYLOAD PAYLOAD	30. PAYLOAD PAYLOAD	31. PAYLOAD PAYLOAD	
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**SECRET**

7/13/67

MEMORANDUM FOR: Secretary CSCS Panel, Section D

SUBJECT : Recommendation for the Promotion of Mr.  
Daniel Flores From GS-05 to GS-06.

1. Mr. Flores has been working in WH/COG and its predecessor groups since 1963. His fitness reports have been consistently good and the comments of his supervisors laudatory. In mid-1965 Mr. Flores was changed from full-time to part-time staff employee in order to allow him to attend American University on a full-time basis. His course of study leads to a Bachelor's Degree in Political Science with emphasis in Latin American affairs. Mr. Flores has made the Dean's List the past two semesters and will receive his degree in August 1967.

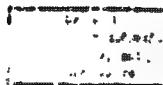
2. Throughout his career Mr. Flores has shown himself to be a strongly motivated employee, willing and capable. The calibre of his performance has been consistently good and he has shown steady improvement as he acquired the skills and knowledge of intelligence business. He is reliable and conscientious and we have good reason to expect that he will develop into a very competent operations officer. He will apply for the CT program in September and his application will be wholeheartedly supported by WH/COG.

3. In WH/COG Mr. Flores has served as an Intelligence Assistant in support of CI operations. In addition he has assisted in the training of agents in [redacted] communications. Mr. Flores is bi-lingual - Spanish and English - and is adept as an operational Translator-Interpreter.

4. Mr. Flores was promoted to GS-05 on 16 March 1964. He has been performing duties at GS-06 level for the past two years and it is sincerely recommended that he be promoted promptly to GS-06.

*William V. Broo*  
William V. Broo  
Chief  
Western Hemisphere Division

**SECRET**



SECRET

(4) New Edition 10-62

REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1 SERIAL NUMBER 036130	2 NAME (Last-First-Middle) FLO GUY DANIEL							3 DATE PREPARED 14 Sep 66	
4 NATURE OF PERSONNEL ACTION REASSIGN POSITION				5 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 15 66		6 CATEGORY OF EMPLOYMENT PART TIME			
7 FUNDING X CP TO V		8 V TO CP		9 COST CENTER NO CHARGE NAME 7235 1162		10 LEGAL AUTHORITY (Completed by Office of Personnel)			
11 ORGANIZATIONAL DESIGNATIONS TOP/MH W3/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION				12 POSITION NUMBER 1176		13 CAREER SERVICE DESIGNATION d			
14 CLASSIFICATION SCHEDULE (GS, IB, etc.) GS		15 OCCUPATIONAL SERIES 0301.27		16 GRADE AND STEP 05 4		17 SALARY OR RATE \$ 5359.			
18 REMARKS From: W3/C, Intel Br., R & R Sec, DC // 1104									
19 DATE SIGNED CAB/PDS 14 Sep 66				20 SIGNATURE OF CAREER SERVICE APPROVING OFFICER M. J. Miller				21 DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
22 ACTION CODE 37.90	23 EMPLOY CODE 51500	24 OFFICE CODING Alpha/Beta	25 STATION CODE WH	26 INTRIGUE CODE 37213	27 MOBILES CODE 1	28 MOBILES MO DA YR	29 DATE OF BIRTH MO DA YR	30 DATE OF GRADE MO DA YR	31 DATE OF LEI MO DA YR
20 BITS EXPIRES =0 00 10	22 SPECIAL REFERENCE 1-CM 2-HCA 3-BOM	23 RETIREMENT DATA CODE	24 SEPARATION DATA CODE	25 CORRECTION CANCELLATION DATA TYPE	26 MO DA YR	32 EOD DATA →			
33 VET PREFERENCE CODE 0-00 1-1 P 2-10 P	34 VET TEMP DATE MO DA YR	35 LONG TEMP DATE MO DA YR	36 CAREER CATEGORY CAT. 000 PREV TEMP	37 MEDICAL INSURANCE CODE 0-000 1-000 2-000	38 LIFE INSURANCE CODE 0-000 1-000 2-000	39 SECURITY REG BD	40 SEE REG BD		
41 PREVIOUS LEAVE/OUT SERVICE DATA CODE 6-00 PREVIOUS LEAVE 1-00 REG BD SERVICE 2-00 REG BD (LAST THREE 3 YEARS) 3-00 REG BD (LAST THREE 3 YEARS)	42 LEAVE END CODE	43 FEDERAL TAX DATA FED TAX PAYROLL CODE	44 STATE TAX DATA STATE TAX PAYROLL CODE	45 L.D.P. APPROVAL CODE	46 DATE APPROVED 14 SEP 66				
47 POSITION CONTROL CERTIFICATION 09-19-66-A					48 L.D.P. APPROVAL CODE				

Form 1152 (Rev. 6-62) USE PREVIOUS EDITION

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S E C R E T  
(When Filled In)

9 September 1966

MEMORANDUM FOR: Mr. Daniel Flores

THROUGH : Head & CS Career Service

SUBJECT : Notification of Non-eligibility for Designation as a Participant in the CIA Retirement and Disability System

1. As you may know, we are in the process of reviewing the employment history and current career field of all employees in the Agency to identify those who are eligible for designation as a participant in the new CIA Retirement and Disability System. In this process, the initial review of each case is made by the individual's Career Service. If the Head of his Career Service nominates him for participation in the System, this nomination is reviewed by the CIA Retirement Board which recommends final action to me. However, if the Head of the Career Service advises that the employee does not meet the basic requirements of HR 20-50 for participation, I have accepted this finding without further review by the CIA Retirement Board. This practice has been adopted in the interest of expediting this screening process so that those employees who are eligible to participate in the System may be designated participants as soon as possible.

2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. This in no way affects your current status under the Civil Service Retirement System, nor does it preclude reconsideration of your eligibility to participate in the CIA System if you should meet the requirements for designation in the future.

3. Should you desire further information concerning the requirements for designation as a participant in the CIA Retirement System, I suggest that you read paragraph e of HR 20-50 and paragraph 5 of the Employee Bulletin dated 30 July 1965, entitled "Public Law 88-643, The Central Intelligence Agency Retirement Act of 1964 for Certain Employees."

4. It is always possible that the records upon which the determination made in your case may have been incomplete or inaccurate regarding your actual employment history with the Agency. If, after studying the materials cited above, you have questions regarding the determination that you are not eligible to participate in the CIA Retirement System, please feel free to contact officials of your Career Service. They are familiar with the details of your case and will gladly discuss them with you. In addition, you may wish to discuss your case with the CIA Retirement Staff located in Room 205, Magazine Building (extension 2847). If such discussions do not resolve any questions you have regarding your eligibility, you may request that your case be formally considered by the CIA Retirement Board. However, this request must be made within 30 days of the date of this memorandum.

  
Emmett D. Echols  
Director of Personnel

S E C R E T

**SECRET**

**CENTRAL INTELLIGENCE AGENCY  
WASHINGTON, D.C. 20505**

**17 JAN 1966**

**Claimant: Daniel Flores  
File No.: 7000438**

Mr. Wilfred J. Harren  
Chief of Section  
Division of Claims Services  
Bureau of Employees' Compensation  
Washington, D. C. 20211

Dear Mr. Harren:

Reference is made to Subject's claim for benefits of the Federal Employees' Compensation Act.

Enclosed is additional information submitted by claimant.

If we may be of further assistance in this matter, please so advise.

Very truly yours,

**/s/ B. DeFelice**

B. DeFelice  
Office of Personnel

Enclosures:

As stated

Distribution:

O-addressee, 1-D/Pers, 1-BCB  
OP/BSB/BCB/ (14 January 1966)



## SECRET

(If less than 100)

REQUEST FOR PERSONNEL ACTION								DATE PREPARED
1. SERIAL NUMBER 036130	2. NAME (Last-First-Middle) FLODIS, Daniel							13 August 1965
3. NATURE OF PERSONNEL ACTION RETIREMENT								4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 16 65
5. FUNDS		X V TO V	V TO CF	7. COST CENTER NO CHARGEABLE 6235-1162		8. LEGAL AUTHORITY (Completed by Office of Personnel) Intelligence Branch Reports and Requirements Section		
9. ORGANIZATIONAL DESIGNATIONS Intelligence Branch Reports and Requirements Section								10. LOCATION OF OFFICIAL STATION Washington, D.C.
11. POSITION TITLE TITLE: SP/ERK (E)				12. POSITION NUMBER 11381	13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS (06)		15. OCCUPATIONAL SERIES 0301.27		16. GRADE AND STEP 05 (3)	17. SALARY OR RATE \$ 5330			
18. REMARKS From: DEP/WB/CI St., #1130, D.C.								
				Recorded by CSPD Ayn				
DATE SIGNED 13 Aug 65				18. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED 8/20/65	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE 37 20	20. EMPLOY CODE 51701	21. OFFICE CODING NUMERIC ALPHABETIC UH	22. STATION CODE 75813	23. INTEGEE CODE 1	24. MOONS CODE MO DA YR	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. RITE EXPRIES MO. DA YR	29. SPECIAL REFERENCES 1-CIA 2-FBI 3-BOMB	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE	33. SECURITY REG RD MO DA YR	34. SEX MO DA YR		
35. RET PREFERENCE CODE 0-DOES 1-SPI 2-10 PT	36. SERV COMP DATE MO. DA. YR	37. LONG COMP DATE MO. DA. YR	38. CARRY CATEGORY FAM RISK POW, TEMP	39. FED. HEALTH INSURANCE CODE 0-BAYER 1-MIS	40. SOCIAL SECURITY NO HEALTH INS. CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-DO RELATE TO SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-CLEAR TO SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED 1-IRS 2-BD	44. MO. TAX EXEMPTIONS CODE	45. STATE TAX DATA FORM EXECUTED 1-IRS 2-BD	46. MO. TAX EXEMPTIONS CODE	47. STATE TAX DATA STATE CODE EXEMPT		
48. POSITION CONTROL CERTIFICATION 9-20-65 W/R		49. O.P. APPROVAL			50. DATE APPROVED 8/20/65			

~~SECRET~~

(11/14 Filled In)

REQUEST FOR PERSONNEL ACTION							DATE PREPARED		
1 SERIAL NUMBER 036130		2 NAME (Last-First-Middle) FLORES, Daniel					15 January 1965		
3 NATURE OF PERSONNEL ACTION PAY ADJUSTMENT (TO PART TIME) FROM FULL TIME							4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 08 65	5. CATEGORY OF EMPLOYMENT Casual (PART TIME)	
6 FUNDS		X V TO V CP TO V	V TO CP CP TO CP	7. COST CENTER NO CHARGEABLE 5235-1162			8. LEGAL AUTHORITY (Completed by Office of Personnel)		
9. ORGANIZATIONAL DESIGNATIONS DPP Special Affairs Staff Counter-Intelligence Staff Operations Section							10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11 POSITION TITLE INTELLIGENCE ASST. (D)				12 POSITION NUMBER 1130	13 CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, IB, etc.) GS (35)		15 OCCUPATIONAL SERIES 0301.28		16 GRADE AND STEP 05 (2)	17 SALARY OR RATE \$ 5165				
18 REMARKS  Subject to work on regularly scheduled tour not to exceed 19 hours per week.  Subject will be working Monday through Friday, from 1400 to 1700.									
				Recorded by CSPD Am					
				18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER libby/3rd Reg Cm, RSP/D	DATE SIGNED 2/26/65				
C/WH/Pers.				DATE SIGNED 2/26/65	DATE SIGNED 2/26/65				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE 2F	20. EMPLOY. CODE 36	21. OFFICE CODING 44/150	22. STATION CODE 1147	23. INTEGEE CODE 7500	24. HQTRS CODE 1	25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.	
28. BTE EXPIRES		29. SPECIAL REFERENCE 1-CSA 2-FICA 3-HOWE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE TYPE	32. CORRECTION, CANCELLATION DATA MO. DA. YR.	33. SECURITY REQ. NO 34. SEC			
35. VET PREFERENCE CODE 0-NONE 1-LT. PT 2-10 PT		36. SEFT COMP. DATE MO. DA. YR.	37. ICNS COMP. DATE MO. DA. YR.	38. CAREER CATEGORY CAR REG PROV TEMP CODE	39. FEGL HEALTH INSURANCE CODE 0-BASIC 1-ESI	40. SOCIAL SECURITY NO	41. STATE TAX DATA CODE PROV CODE		
42. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO REGULAR SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE, MORE THAN 3 YEARS)		43. LEAVE CAT CODE	44. FEDERAL TAX DATA POSA EXECUTED 1-PES 2-PS	45. IND. TAX EXEMPTIONS CODE 1-PES 2-PS	46. STATE TAX DATA POSA EXECUTED 1-PES 2-PS	47. DATE APPROVED			
48. O.P. APPROVALS DATE APPROVED 2/26/65									

036130 1152 USE PREVIOUS EDITION

SECRET

036130 1152  
15 JAN 1965  
CSPD

**SECRET**  
*(When Filled In)*

(Large diagonal hatching pattern)		
NAME OF EMPLOYEE (Last-First-Middle)		
Florin, Daniel		
NAME AND RELATIONSHIP OF DEPENDENT*		
Self		
CLAIM NUMBER		
65-524		
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>3 September 1964</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BOD REPRESENTATIVE	
12 JUL 1965		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

6 January 1965

MEMORANDUM FOR: Chief, CSPO

SUBJECT : Conversion to Part-Time Staff Employment  
Mr. Daniel Flores

1. Mr. Daniel Flores is an Intelligence Assistant, GS-07, assigned to the CI Staff of WH/SA. He is currently pursuing a program of studies in Government at the American University with special concentration on Latin American Affairs. To complete the major portion of his remaining requirements for the bachelor's degree, he is planning to attend the University full-time for a year. Any requirements still outstanding at the end of that period would be completed at night.

2. The employee's duties in the CI Staff involves the translation of [redacted] messages received from and sent to [redacted] assisting in the training of [redacted] in [redacted] and communications procedures, and miscellaneous support functions in the CI Branch. He has proved invaluable because he has native fluency in every-day Spanish and is familiar with [redacted] and communication techniques, problems, and training procedures. In addition to Mr. Flores' utility for such cases as may arise in the future, he is personally acquainted with [redacted] of the [redacted] [redacted] and with the numerous problems which constantly arise in their handling.

3. In view of the need for Mr. Flores' services, the Chief, CI Staff, has asked the employee if he would be willing to continue in his present capacity on a part-time basis. The employee has indicated that he would accept such an arrangement. It is accordingly requested that WH/SA be permitted to convert him from a full-time staff employee to one employed on a part-time, regular tour of duty basis. Subject would be utilized for a total of 18 hours per week, the maximum time that his school program will permit him to devote to Agency duties.

[redacted]  
C/HQ/Personnel

**SECRET**

SECRET

SECRET

(When Filled In)

3-15

REQUEST FOR PERSONNEL ACTION					DATE PREPARED	
1. SERIAL NUMBER 036130	2. NAME (Last-First-Middle) FLORES, Daniel			3. DATE PREPARED 13 January 1964		
4. NATURE OF PERSONNEL ACTION PROMOTION			5. PAY RATE PER MONTH MONTH DAY YEAR E 13 02 64		6. CATEGORY OF EMPLOYMENT REGULAR	
7. FUNDS <input checked="" type="checkbox"/>	V TO V	V TO CP	CP TO V	CP TO CP	8. COST CENTER NO. CHARGEABLE 4232-1000-1000	
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Research Branch Reports, Records, Translation Section			10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE TRANSLATOR		(S)	12. POSITION NUMBER 0702	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		(S)	15. OCCUPATIONAL SERIES 1015.01	16. GRADE AND STEP 05 (S) 2	17. SALARY OR RATE \$4690 4,850	
18. REMARKS Promotion recommendation attached; Fitness Report submitted previously.						
			Recorded by CSPD <i>[Signature]</i>			
19A. SIGNATURE OF REQUESTING OFFICER C/SAS/Pers.		DATE SIGNED 13 Jan 64		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
20. ACTION CODE CODE 22 10	21. OFFICE CODES CODE 49350 595 75013	22. STATE IN CODE CO01	23. ZIP CODE CODE 00000	24. WO/DO/BS CODE 1	25. DATE OF BIRTH MM DD YY 00 00 64	26. DATE OF HIRE MM DD YY 00 00 64
20. RENT EXPENSE	21. SPECIAL REFERENCE NO. 00 00 00	22. DEPT. LEVEL DATA CODE 1 = CSC 2 = PSC 3 = DODP	23. DISTRIBUTION DATA CODE 00000	24. COMM. CTR./DISPATCH LOC. (IN 2074) CODE 00000	25. RENT EXPENSE MM DD YY 00 00 64	26. CSC. REC. 00000
27. GEN. PREFERENCE	28. GEN. COMP. DATA NO. 00 00 00	29. CARRIER CATEGORY CODE 00000	30. REG. / MEDICAL INSURANCE CODE 00000	31. SOCIAL SECURITY CODE 00000	FOD DATA 	
32. PREVIOUS GOVERNMENT SERVICE DATA	33. PAYROLL DATA CODE 10000	34. PAYROLL TAX DATA CODE 10000	35. PAYROLL TAX DATA CODE 10000	36. PAYROLL TAX DATA CODE 10000		
37. POSITION CONTROL CERTIFICATION <i>2/11/64</i>	38. O.P. APPROVAL <i>2/11/64</i>	39. DATE APPROVED				

19 December 1963

MEMORANDUM FOR: Clandestine Services,  
Career Services Panel

SUBJECT : Mr. Daniel Flores -  
Recommendation for Promotion

1. Mr. Flores has been with the Agency for about eighteen (18) months and has been a member of SAS since June 1963. During the six (6) months he has been with SAS he has demonstrated intelligence and initiative. In addition to his fulfilling his primary responsibility as a translator, he quickly picked up the knowledge and experience necessary for an Intelligence Assistant in the Operations Support Section. His duties and responsibilities accordingly have been broadened. He has demonstrated ability to function independently as a member of the Operations Support Staff. He is cooperative and has maintained a cheerful disposition under pressure and through many late hours and weekends of duty.

2. In view of his excellent performance in SAS, his intelligence and ability, and his growth potential for a career in CIA, I strongly recommend that he be promoted to GS-5 as soon as possible.

[Redacted]  
Chief, SAS/Intell

APPROVAL RECOMMENDED

DESMOND FITZGERALD  
Chief, Special Affairs Staff

## SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 23 April 1963	
1. SERIAL NUMBER 036130 ✓	2. NAME (Last-First-Middle) FLORES, Daniel						
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 05 13 63		5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS ►	X	V TO V		V TO CF	7. COST CENTER NO. CHARGEABLE 3232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Research Branch Reports, Records, Translation Section				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE TRANSLATOR				12. POSITION NUMBER 0702	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (OS, LB, etc.) GS		15. OCCUPATIONAL SERIES (00) 0031.01		16. GRADE AND STEP 04 (2)	17. SALARY OR RATE \$ 4250		
18. REMARKS From: DDP/OPSER/RID, Ref. R-#0147.DC Tracy 9 CONCURRENCE: [Signature] [Signature] Chief of Admin/OPSERV/RID							
4/26/63 SC/US/CSPD AG FOR 2013 FEB 14 1963				Recorded by CSPD dmc			
1 cy. Security				19. SIGNATURE OF CAREER SERVICE APPROVING C/SAS/Pepo. 24 Apr 63			
DATE SIGNED 1 May 63							
SPACE BELOW FOR EXCLUS. USE OF THE OFFICE OF PERSONNEL							
20. ACTION TO EMPLOYEE CODE 37 10 601350	21. OFFICE CODES ALPHABETIC SAS	22. STATE CO-OP CODE 75013	23. STATE CO-OP CODE 1	24. STATE CO-OP CODE 1	25. STATE CO-OP CODE 1	26. STATE CO-OP CODE 1	27. STATE CO-OP CODE 1
28. SITE EXP-DAT	29. SPECIAL REFERENCE NO. 00 00 00	30. RET-REPORT DATA 1 = CSC 2 = FIS 3 = Other	31. STATE CO-OP CONNECTION/CANCELLED ON DATA DATE CODE	32. STATE CO-OP CONNECTION/CANCELLED ON DATA DATE CODE	33. STATE CO-OP CONNECTION/CANCELLED ON DATA DATE CODE	34. STATE CO-OP CONNECTION/CANCELLED ON DATA DATE CODE	35. STATE CO-OP CONNECTION/CANCELLED ON DATA DATE CODE
36. RET. PREFERENCE CODE 0 = None 1 = CSC 2 = FIS 3 = Other	37. STATE CO-OP CODE 00 00 00	38. CARRIER CATEGORY CODE 0000	39. REGT / HEALTH INS/BENEF CODE 0000 0000	40. SOC. SEC. SECURITY NO. CODE 0000 0000			
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 = No Previous Service 1 = Prior to Service 2 = Prior to Service (Date from 3 ret) 3 = Prior to Service (Date from 3 ret)	42. PREVIOUS GOVERNMENT SERVICE DATA CODE 0000	43. FEE ESTIMATE 1 = Yes 2 = No	44. FEE ESTIMATE 1 = Yes 2 = No	45. FEE ESTIMATE 1 = Yes 2 = No	46. FEE ESTIMATE 1 = Yes 2 = No	47. FEE ESTIMATE 1 = Yes 2 = No	48. FEE ESTIMATE 1 = Yes 2 = No
49. POSITION CONTROL CERTIFICATION R. J. Rodriguez (CS) G.B.				50. APPROVAL CODE HVA 1120 0000 P3	51. APPROVAL CODE 1120 0000 P3		
52. APPROVAL CODE 1120 0000 P3				53. APPROVAL CODE 1120 0000 P3			54. APPROVAL CODE 1120 0000 P3

## SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED		
1. SERIAL NUMBER <i>10811</i>	2. NAME (Last-First-Middle) <i>FLORFS Daniel</i>			3. EFFECTIVE DATE REQUESTED MOTH DAY YEAR <i>03 11 62</i>		
4. NATURE OF PERSONNEL ACTION <i>Excepted Appointment</i>				5. CATEGORY OF EMPLOYMENT <i>Regular</i>		
6. FUNDS <input checked="" type="checkbox"/>	V TO V <input type="checkbox"/>	V TO CF <input type="checkbox"/>	CF TO V <input type="checkbox"/>	CF TO CF <input type="checkbox"/>	7. COST CENTER NO. CHARGEABLE <i>2226 1200 1000</i>	
8. ORGANIZATIONAL DESIGNATIONS  <i>DDP OPSER R I DIV Reference Branch Index Section - Night Shift</i>				9. LOCATION OF OFFICIAL STATION  <i>Wash., D. C.</i>		
10. POSITION TITLE  <i>File Clerk</i>				11. POSITION NUMBER <i>0147</i>	12. PCR CONTROL NO. <i>1010</i>	
13. CLASSIFICATION SCHEDULE (GS, LS, etc.) <i>GS</i>		14. OCCUPATIONAL SERIES <i>0305.01</i>		15. GRADE AND STEP <i>OL 1</i>	16. SALARY OR RATE <i>\$10.00</i>	
17. REMARKS  <i>Subject to trial period and probation</i>						
				<i>Approved by CoiD</i>		
18. SIGNATURE OF REQUESTING OFFICIAL <i>Allen H. Hanson 09/11/61</i>				19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		
20. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
21. ACTION CODE <i>11</i>	22. EMPLOYEE CODE <i>10</i>	23. OFFICE CODING <i>39400</i>	24. STATUS CODE <i>X1</i>	25. DATE HIRED CODE <i>03/11/62</i>	26. DATE OF REHIRE CODE <i>03/11/62</i>	27. DATE OF LES CODE <i>03/11/62</i>
28. RPT EXP. RES. NO. DR. YRS.	29. SPECIAL REFERENCES	30. RET. ELEMENT DATA CODE <i>1-0 CS, 1-0 TCB 1-0 WAW</i>	31. SEPARATION DATA CODE <i>1-0 00</i>	32. CANCELLATION DATA TYPE <i>FOD</i>	33. SECURITY DATA SEC. NO. <i>07100 111</i>	34. SOCIAL SECURITY NO. <i>460-78-6230</i>
35. RET. PREFERENCE CODE <i>C</i>	36. SERV. COMM. DATE CODE <i>03/11/62</i>	37. LONG. COMM. DATE CODE <i>03/11/62</i>	38. M. L. COMM. DATE CODE <i>03/11/62</i>	39. RET. / REHIRE ASSESS. CODE <i>1-0 000</i>	40. MEDICAL ASSESS. CODE <i>1-0 000</i>	41. SOCIAL SECURITY NO. <i>460-78-6230</i>
42. PREVIOUS DEPARTMENT SERVICE DATA CODE <i>0</i>	43. PREVIOUS PAY DATA CODE <i>0</i>	44. PREVIOUS PAY DATA CODE <i>0</i>	45. PREVIOUS PAY DATA CODE <i>0</i>	46. PREVIOUS PAY DATA CODE <i>0</i>	47. PREVIOUS PAY DATA CODE <i>0</i>	48. PREVIOUS PAY DATA CODE <i>0</i>
49. POSITION CONTROL CERTIFICATION  <i>10811 03 11 62</i>				50. O.P. APPROVAL		

SECRET

161

14 February 1962

Mr. Daniel Flores  
Apartment 203  
2828 Connecticut Avenue, N. W.  
Washington 8, D. C.

Dear Mr. Flores:

We are pleased to inform you that your appointment with this Agency has been approved at Grade GS-4, salary \$4040.00 per annum, as Clerk.

Your permanent employment will depend upon the completion of the following processing at the time of entering on duty: taking the oath of office, signing a loyalty affidavit, participating in a final security interview. Should anything of an unfavorable nature arise during this period, your employment will not result in a permanent appointment.

We hope you will be able to join us at an early date. Please dial 351-2781 and ask for Mrs. Shirley Wells, as soon as possible, in order to arrange an entrance-on-duty date. We would appreciate your selecting a Monday.

Please report to the Receptionist at 1016 - 16th Street, N. W., Room 201 at 8:15 a.m. and ask for Mrs. Wells on the reporting for duty date that you establish with this office. This address is located on 16th Street between K and L Streets opposite Hotel Statler.

Your gross earnings will be subject to deductions for Federal Income tax and 6 1/2 percent for the United States Civil Service Retirement Fund. In addition, the benefits of low-cost group life insurance, which will be discussed with you at the time of your entrance on duty, are available to Federal civilian employees. This insurance is not obligatory. However, if you do not wish coverage, which is automatic, you should sign a Waiver of Life Insurance Coverage form at the time you enter on duty.

You will not receive a pay check for approximately four weeks  
after your entrance on duty.

If you have any problems, Mrs. Wells will be glad to discuss  
them with you when you call.

Very truly yours,

E. D. Echols  
Director of Personnel

OP/Corres/mjt  
File sent to: Shirley Wells

26 January 1962

Mr. Daniel Flores  
Apartment 203  
2828 Connecticut Avenue, N. W.  
Washington 8, D. C.

Dear Mr. Flores:

Processing of your application for employment with this Agency is continuing. Please advise us if any circumstance should arise which might affect your interest in a position with us.

Your continued interest and patience are appreciated.

Very truly yours,

E. D. Echois  
Director of Personnel

OP/Corres/sjm  
File sent to:Wells

20 October 1961

Mr. Daniel Flores  
Apartment 203  
2828 Connecticut Avenue, N. W.  
Washington 8, D. C.

Dear Mr. Flores:

In connection with your application with this Agency, it will be necessary for you to come to our Medical Office in Central Building, 2430 E Street, N. W., for a pre-employment medical examination which will include determination of physical health and emotional stability.

An appointment may be scheduled by dialing 351-2781 and asking for Mrs. Shirley Wells.

Very truly yours,

E. D. Echois  
Director of Personnel

OP/Corres/car  
file sent to Shirley Wells

12 October 1961

Mr. Daniel Flores  
Apartment 203  
2828 Connecticut Avenue, N. W.  
Washington 8, D. C.

Dear Mr. Flores:

Your application for employment with this Agency has been reviewed with interest and the processing of your case has been initiated for a full-time position on the 3:30 p.m. to 12:00 p.m. shift at Grade GS-4, salary \$4040.00 per annum, plus a ten percent night differential for the hours from 6:00 p.m. to 12:00 p.m., as Clerk.

Your final appointment is dependent upon a number of factors including character and reference investigations, and other processing procedures which may require as long as 120 days. You may be sure that this processing is being accomplished as rapidly as possible.

During this period please notify us of any changes in your present status such as change in address, employment, marital status, etc. If you cannot accept the position or if you have any questions concerning your application, you should write to Mrs. Shirley Wells.

Members of this Agency are entitled to the regular United States Government leave and retirement benefits. Our salaries conform to the rates prescribed by Congress for United States Government agencies.

Thank you for your cooperation and patience during this waiting period.

Very truly yours,

A. D. Echols  
Director of Personnel

OP/Corres/car  
file sent to shirley wells

**SECRET**  
(When Filled In)

**REQUEST FOR SECURITY CLEARANCE**

NAME (LAST - FIRST - MIDDLE) <b>FLORES, DANIEL</b>		POSITION NUMBER (SI - DO) <b>0117</b>		OCCUP. CODE (SF - GS) <b>0306.01</b>		REQUEST NO. (SI-SI) <b>075.00</b>
POSITION TITLE <b>FILE CLERK</b>		ASSIGNMENT (OFFICE, DIVISION, BRANCH) <b>DDP/OPPER</b>		CONVERSION ACTION IF OTHER, SPECIFY: <b></b>		REQUEST DATE (SI-SI) <b>6 October 1961</b>
LOCATION (CITY, STATE, COUNTRY) <b>WASHINGTON, D. C.</b>						YEAR OF BIRTH (SS-DO) <b>4 August 1935</b>
TYPE OF APPLICANT <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> CONTRACT <input type="checkbox"/> MILITARY						GRADE (AS-4G) <b>OS-01</b>
NAME OF REQUESTER (OR OFFICIAL)				TYPE OF ASSIGNMENT AND FUND <input checked="" type="checkbox"/> HQS      USP      FP <input checked="" type="checkbox"/> V      UV		ORGAN. CODE (AS-4D) <b>3900</b>
CLEARANCE REQUIRED	PROVISIONAL FOR (INDICATE NAME OF POOL OR GROUP)				TYPE OF ASSIGNMENT AND FUND <input checked="" type="checkbox"/> HQS      USP      FP <input checked="" type="checkbox"/> V      UV	
ATTACHMENTS	<input checked="" type="checkbox"/> PERSONAL HISTORY STATEMENT		<input checked="" type="checkbox"/> APPENDIX I		REQUEST FOR WAIVER	
	<input checked="" type="checkbox"/> PHOTOGRAPH(S)		<input checked="" type="checkbox"/> APPENDIX II		REPORT OF INTERVIEW	
VETERANS STATUS	<input checked="" type="checkbox"/> MALE - VETERAN		<input checked="" type="checkbox"/> FEMALE - VETERAN		RECRUIT. CODE (SS-S4) <b>105</b>	
	<input checked="" type="checkbox"/> MALE - NON-VETERAN		<input checked="" type="checkbox"/> FEMALE - NON-VETERAN		VET PREP. & SEE (SS) <b></b>	
SPACE BELOW FOR OS USE ONLY						

1 - SO  
1 - OTR

15 September 1961

Mr. Daniel Flores  
Apartment 203  
2828 Connecticut Avenue, N. W.  
Washington 8, D. C.

Dear Mr. Flores:

Appropriate members of our staff are reviewing your application for employment to determine whether we have a position available for a person of your qualifications. Although we cannot predict the length of time needed for this review, every effort will be made to reach an early decision. We will keep you as fully informed as possible regarding the status of your case.

Very truly yours,

E. D. Echoes  
Director of Personnel

OP/Corres-bt  
file sent to Mr. [redacted]

CONFIDENTIAL  
(When Filled In)

REPORT OF INTERVIEW		DATE OF INTERVIEW	SOURCE	
CANDIDATE (Last, First, Middle) <b>Flores, Daniel</b>		21 August 1961	gen info	
TEMPORARY ADDRESS		PLACE OF BIRTH	DATE OF BIRTH	
PERMANENT ADDRESS		San Marcos, Texas	PHONE	
BUSINESS ADDRESS		Washington, D.C.	PHONE	
PLACE OF INTERVIEW		immediately on clearance	DATE AVAILABLE	
RANK (Officer, Enlist)		GS- 4	TESTS	
PII clerk 3:30-midnight		SET	14-33-33-84	
<p>Mr. Flores had just been recently released from active duty with the USMC when he came in for interview. He has served two tours which included Security guard Embassy duty in Peru and Bolivia. His wife was formerly stationed at the Embassy with Dept. of State. He appears to be a mature young man, clean cut, neat appearance, dark complexion and coloring. He is planning to continue his college education at C.U. and is available to work the 3:30 - midnight PI shift. A clerical position at the GS-4 level was discussed in the interview. His wife is a secretary with a law firm in town; they have no children.</p> <p><b>topx:</b></p> <p>Mr. Flores is in excellent health and had a very good record with the Marine Corps. Known of nothing in his background that would be unfavorable in event of reference check. At initial interview he stated that he had no foreign connections, however, after contacting his family in Texas it was determined that his step-mother was born in Mexico and although she came to the US in 1922, she has never become a US citizen.</p> <p>Full clearance.</p>				
DATE SENT TO HQ		INTERVIEWER	RECORDED BY	
85-t 61		Joy Cooney		

CENTRAL INTELLIGENCE AGENCY  
WASHINGTON 25, D. C.

Applicant Information  
Sheet No. 1

To all persons applying for employment  
with the Central Intelligence Agency:

This paper is the first step in applying for employment or consultant status with the Central Intelligence Agency. No application may proceed beyond this first step if the applicant is not in agreement with the conditions stated below:

General Considerations:

1. The National Security Act of 26 July 1947 (Public Law 253, 80th Congress) which created the Central Intelligence Agency places upon the Agency the responsibility:

- a. "to advise the National Security Council in matters concerning such intelligence activities of the Government departments and agencies as relate to the national security;
- b. "to make recommendations to the National Security Council for the coordination of such intelligence activities of the departments and agencies of the Government as relate to the national security;
- c. "to correlate and evaluate intelligence relating to the national security, and provide for the appropriate dissemination of such intelligence within the Government . . . ;
- d. "to perform, for the benefit of the existing intelligence agencies, such additional services of common concern as the National Security Council determines can be more efficiently accomplished centrally;
- e. "to perform such other functions and duties related to intelligence affecting the national security as the National Security Council may from time to time direct."

The special character of this national responsibility requires the Agency to maintain correspondingly special employment criteria which may be different from the routine or normal employment standards of other Government departments and agencies which do not have the highly sensitive responsibility borne by the Central Intelligence Agency. It follows that the investigation of applicants prerequisite to their acceptance is a time-consuming process which, in addition to loyalty and security checks, includes evaluation of competence, physical and emotional fitness, and availability of a suitable position at such time as employment may be offered. This is called "clearance" of an applicant.

2. Investigation of an applicant may reveal something which prevents his clearance - perhaps something of which the applicant is genuinely unaware, perhaps something which only the special employment criteria of the Agency make unacceptable. In any event, adverse findings by the Agency are conclusive and final so far as the Agency is concerned, and no statement of specific reasons is made to the applicant.

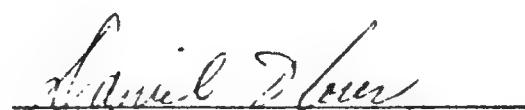
3. Employment by the Central Intelligence Agency is not a right upon which an applicant can insist. Offer of employment which is subject to full clearance does not constitute a commitment on the Agency's part giving an unsuccessful applicant grounds for any claim against the Agency. Acceptance of employment upon the condition of clearance is at the applicant's risk, taken with the knowledge that a very substantial percentage of applicants are not cleared.

Statement of Understanding  
and Agreement

I have read, understand, and agree to the foregoing General Considerations. If not accepted for employment by the Central Intelligence Agency, I will make no claim or demand in conflict with those considerations.

I have also seen and read Applicant Information Sheet No. 2.

SIGNED at Washington, D. C., this 5<sup>th</sup> day of September, 1961.

  
(Signature of Applicant)  
Daniel Flores

**SECRET**

**REPRODUCTION MASTERS**

**SECRET**

**BIOGRAPHIC PROFILE**

**SECRET**

H a n d l e   W i t h   C a r e



SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP				DATE 6 OCTOBER 75	FILE NO. 15075
TO: (CROSS)	X	CHIEF, CONTROL DIVISION, OP		SS NUMBER [Redacted]	EMPLOYEE NUMBER 030130
		CHIEF, CONTRACT PERSONNEL DIVISION, OP		ID CARD NUMBER [Redacted]	
	X	CHIEF, (OPERATING COMPONENT FOR ACTION) ATTN: LA			
REF.	Form 1522 Dated 18 Aug 75			OFFICIAL COVER	X ESTABLISHED CANCELLED
STATUS	X	STAFF	CONTRACT	UNIT	
SUBJECT	[Redacted]				
<b>KEEP ON TOP OF FILE WHILE COVER IN EFFECT</b>					
ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)				CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)	
<input checked="" type="checkbox"/> BASIC COVER PROVIDED <input type="checkbox"/> EFFECTIVE DATE <u>100</u>				EFFECTIVE DATE:	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TOY</u> OTHER (SPECIFY)				SUBMIT FORM 3254 <u>N-2</u> TO BE ISSUED (NHB 20-7)	
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANG TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (NHB 20-7)				SUBMIT FORM 642 IMMEDIATELY TO CHANG TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>3</u> (NHB 20-7)	
<input checked="" type="checkbox"/> SUBMIT FORM 3254 <u>N-2</u> TO BE ISSUED. (NHB 20-7)				EAA- CATEGORY I	CATEGORY II
				RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
<input checked="" type="checkbox"/> SUBMIT FORM 1522 FOR ANY CHANGE AFFECTING THIS COVER. (NHB 20-7)				SUBMIT FORM 2680 FOR HOSPITALIZATION CARD.	
<input checked="" type="checkbox"/> SUBMIT FORM 1522 FOR TRANSFERRING COVER RESPONSIBILITY. (NHB 20-7)					
<input checked="" type="checkbox"/> EAA, CATEGORY I <u>  </u> CATEGORY II <u>  </u> <input checked="" type="checkbox"/> SUBMIT FORM 2680 FOR <u>  </u> HOSPITALIZATION CARD					
<input checked="" type="checkbox"/> ESTABLISHING <input type="checkbox"/> CHANGING <input type="checkbox"/> TRANSFERRING <input type="checkbox"/> CANCELING <input type="checkbox"/> CLOSING					

100-1000

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SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE	FILE NO.
		23 APRIL 1974	15675
TOS (check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP	REF ID NUMBER	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP	036130	ID CARD NUMBER
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) MH		
ATTN:	CHIEF SUPPORT STAFF	<input checked="" type="checkbox"/> ESTABLISHED	
REF:	FORM 2458, DATED 16 JANUARY 1974	OFFICIAL COVER	DISCONTINUED
SUBJECT	UNIT		
DANIEL FLORES			

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EOD		EFFECTIVE DATE:	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR TDY OTHER (Specify)		SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY	
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY 4 (HRR 20-7)		EAA: CATEGORY I CATEGORY II	
<input checked="" type="checkbox"/> SUBMIT FORM 3754		SUBMIT FORM 642 IMMEDIATELY TO CCS	
<input checked="" type="checkbox"/> SUBMIT FORM 1322 IMMEDIATELY TO CHANGE TELEPHONE COVER. (RR 240-2)		IN THIS BLOCK	
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (RR 240-2)		DO NOT REMOVE	
<input checked="" type="checkbox"/> EAA: CATEGORY I CATEGORY II XX		ON TOP OF FILE	
<input checked="" type="checkbox"/> SUBMIT FORM 2680 FOR AGE HOSPITALIZATION CARD REMARKS AND OR COVER HISTORY			
RECORDED BY: U.S.P. DATE: 10-04-74 TOS: EP:BLR			

1974 RELEASE UNDER E.O. 14176

SECRET

2025 RELEASE UNDER E.O. 14176

2025 RELEASE UNDER E.O. 14176

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE	
TO:  CCM-1	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	27 November 1967	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	FILE NUMBER	
	<input type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	15675	
ATTN:	XU	EMPLOYEE NUMBER	
	CT	036130	
REF:	ID CARD NUMBER		
	100-1		
SUBJECT	OFFICIAL COVER	BACKSTOP ESTABLISHED	
<input checked="" type="checkbox"/> FLORES, Daniel (NMI)		<input checked="" type="checkbox"/> DISCONTINUED	
UNIT			

**KEEP ON TOP OF FILE WHILE COVER IN EFFECT**

REMARKS AND/OR COVER HISTORY

Nar 62 - Dec 62 Overt

RDP/

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"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305  
OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12165 PURSUANT TO AUTHORITY  
OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI  
DIRECTIVE DATED 18 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 07 OCTOBER 1979

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLORES CANTEL	0636130	LA	GS 13 3	\$31,333

5656

1. SERIAL NO	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS						
0636130	FLORES CANTEL	LA								
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION						
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WFO	OSI	ADJ.
GS-13	3	\$31,333	08/26/77	GS-13	3	\$31,333	01/01/80			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE					DATE					
<input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD										
GROSS PAYROLL										
10-71 5601 PAY CHANGE NOTIFICATION										

10/30/80

ALL

L48 304 015

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305  
OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12067 PURSUANT TO AUTHORITY  
OF DDCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DDCI  
DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 01 OCTOBER 1978

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLORES DANIEL	0036130	LA	US 13 2	\$28,368

5678

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. WORK HOURS
0036130	FLORES DANIEL	SL 620		
6. OLD SALARY RATE		7. NEW SALARY RATE		8. PAY ACTIONS
Grade	Step	Salary	Unit Pay Rate	Current Step Salary EFFECTIVE DATE WGI OSI Adj.
US 13	2	\$28,368	01/25/76 US 13 3 \$29,262	01/28/78
CERTIFICATE AND AUTHENTICATION				
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE				
SIGNATURE				DATE 1/27/78
<input checked="" type="checkbox"/> NO EXCESS IWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF PAYROLL PERIOD <input type="checkbox"/> IWOP STATUS AT END OF PAYROLL PERIOD				
		FACSIMILE BY <i>Raf</i> <i>lef</i>		
FORM 10-71-560F (See previous page)				
PAY CHANGE NOTIFICATION				

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SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)											
036130		FLORES DANIEL											
3. NATURE OF PERSONNEL ACTION													
REASSIGNMENT													
4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT											
MO DA YE		REGULAR											
02 11 78													
6. FUNDS		V TO V	V TO CP	7. JAN AND NSCA									
		CP TO V	CP TO CP	8. USC OR OTHER LEGAL AUTHORITY									
				8035 0990 0000 50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS													
DDO/LA DIVISION FOREIGN FIELD													
10. STATION				11. BRANCH									
12. POSITION TITLE				13. POSITION NUMBER				14. SERVICE DESIGNATION					
OPERATIONS OFFICER				GK76				DRG					
14. CLASSIFICATION SCHEDULE (GS, WF, WO, ETC)				15. OCCUPATIONAL SERIES				16. GRADE AND STEP					
GS				0136.01				13 2					
17. SALARY OR RATE				26689									
18. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. HQDIRE CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI				
37	10	51620 LA		45075	3	MO DA YE	MO DA YE	MO DA YE					
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. Correction / Cancellation Data		33. SECURITY REQ NO	34. SEX					
MO DA YE		CSC CIA FIA AFIAF		CODE	TYPE	MO DA YE							
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGIT / HEALTH INSURANCE	40. SOCIAL SECURITY NO								
CCLC	0 - NOV 00 1 - 3 PT 2 - 10 PT	MO DA YE	MO DA YE	LAB RETR CODE	0 - WAIVER 1 - YES	HEALTH INS CODE							
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA						
CCLC 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 2 yrs 3 - BREAK IN SERVICE LONGER THAN 2 yrs					FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX EXEMPT STATE CODE			
					1 - YES 2 - NO			1 - YES 2 - NO					
SIGNATURE OR OTHER AUTHENTICATION													

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"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305  
OF TITLE 5 U.S.C. AND EXECUTIVE ORDER 12010 PURSUANT TO AUTHORITY  
OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI  
DIRECTIVE DATED 8 OCTOBER 1962."

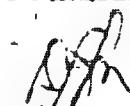
EFFECTIVE DATE OF PAY ADJUSTMENT: 09 OCTOBER 1977

NAME	ID NUMBER	ORG.	SCH-GR-STEP	NEW SALARY
FLCRES DANIEL	0036130	LA	GS 13 1	\$26,022
				5927

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(When Filed In)

## NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)							
036130	FLORES DANIEL							
3 NATURE OF PERSONNEL ACTION REMOVAL FROM PARTICIPATION IN CIA RETIREMENT AND DISABILITY SYSTEM			4 EFFECTIVE DATE MO DA YE 04 10 77	5 CATEGORY OF EMPLOYMENT REGULAR				
6 FUNDS ➤	V TO V CF TO V	V TO CF X CF TO CF	7 PAY AND NSCA 7135 4534 0000	8 CSC OR OTHER LEGAL AUTHORITY PL 88-643 SECT. 203				
9. ORGANIZATIONAL DESIGNATIONS DDO/LA DIVISION			10 LOCATION OF OFFICIAL STATION WASH., D.C.					
11 POSITION TITLE			12 POSITION NUMBER	13 SERVICE DESIGNATION DQG				
14 CLASSIFICATION SCHEDULE (GS, GS, OR)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP 13	17 SALARY OR RATE				
18 REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19 ACTION CODE	20 EMPLOYEE CODE	21 OFFICE CODING NUMERIC ALPHABETIC	22 STATION CODE	23 INTEGRITY CODE	24 HQDRS CODE	25 DATE OF BIRTH MO DA YE	26 DATE OF GRADE MO DA YE	27 DATE OF LEI MO DA YE
28 NTE EXPIRES MO DA YE	29 SPECIAL REFERENCE 1 CSC 2 CIA 3 DIA 4 NONE	30 RETIREMENT DATA CODE 1	31 SEPARATION DATA CODE TYPE 1	32 Correction/Cancelation Data MO DA YE	33 SECURITY REQ NO EOD DATA ➤			34 SEX REQ NO
35 VET PREFERENCE CODE 0 NON 1 2 PT 2 10 PT	36 SERV COMP DATE MO DA YE	37 LONG COMP DATE MO DA YE	38 CAREER CATEGORY CODE 0000 0000	39 FEHT / HEALTH INSURANCE 0 - WAIVER 1 YES HEALTH INS CODE	40 SOCIAL SECURITY NO			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS 3 BREAK IN SERVICE MORE THAN 3 YRS	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FED TAX EXEMPT 1 YES 2 NO	44 STATE TAX DATA STATE TAX EXEMPT 1 YES 2 NO					
SIGNATURE OR OTHER AUTHENTICATION 								

PLF: (01 MAR 77)

SECRET  
(When Filled In)

(ICF		NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER	2 NAME (LAST-FIRST MIDDLE)										
036130	FLORES DANIEL										
3 NATURE OF PERSONNEL ACTION		4 EFFECTIVE DATE	5 CATEGORY OF EMPLOYMENT								
REASSIGNMENT		02 26 77	REGULAR								
6 FUNDS ➤	V TO V		V TO CF	7 PAN AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY					
	CF TO V	X	CF TO CF	7135 4534 MM		50 USC 403 J					
9 ORGANIZATIONAL DESIGNATIONS		10 LOCATION OF OFFICIAL STATION									
DDO/LA DIVISION CUBA OPERATIONS GROUP EA AREA		WASH., D.C.									
11 POSITION TITLE		12 POSITION NUMBER	13 SERVICE DESIGNATION								
OPERATIONS OFFICER		FS35	D2G								
14 CLASSIFICATION SCHEDULE (GS, LB, etc)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE							
GS		0136.01	13 1	24208							
18 REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE	20 EMPLOY. CODE	21 OFFICE CODING		22 STATION CODE	23 INTERAGENCY CODE	24 MOONS CODE	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI		
37	10	NUMERIC	ALPHABETIC	LA	75013	1	MO DA 78	MO DA 78	MO DA 78		
28 NTS EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA		31 SEPARATION DATA CODE		32 Correction/Cancelation Data		33 SECURITY REQ NO	34 SEX
MO DA 78				1 CSC 2 CIA 3 USA 4 HOME		CODE		TIME MO DA 78			
35 VET PREFERENCE		36 SEPV COMP DATE		37 LONG COMP DATE		38 CARRIER CATEGORY		39 FEGL / HEALTH INSURANCE		40 SOCIAL SECURITY NO	
CODE 0 NO 1 5 PT 2 10 PT		MO DA 78		MO DA 78		LAZ 1978 2000 1980		CC08 CC08 0 1 YES 1 1 NO		HEALTH INS CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE		43 FEDERAL TAX DATA		44 STATE TAX DATA					
CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS 3 BREAK IN SERVICE MORE THAN 3 YRS				HIGH FACULTY CC08 1 YES 2 NO		NO TAX EXEMPTIONS 1 YES 2 NO		HIGH EXPENDITURE 1 YES 2 NO		CLERK NO TAX EXEMPT STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION											
L/F											
PCB/AM 1190 3/26 May 10 78		USA PROVINCIAL EQUIPMENT		SECRET		83 ADPTEC 14 01 CP-620 10-87					

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NOTIFICATION OF PERSONNEL ACTION

OLF

1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)			3 EFFECTIVE DATE			4 CATEGORY OF EMPLOYMENT		
036130	FLORES DANIEL			01	30	77	REGULAR		
5 NATURE OF PERSONNEL ACTION				6 PAY AND NSCA			7 PAY OR OTHER LEGAL AUTHORITY		
PROMOTION				V TO V	V TO CP	CP TO V	X	CP TO CP	7135 4534 00000 50 USC 403 J
8. ORGANIZATIONAL DESIGNATIONS				9. LOCATION OF OFFICIAL STATION					
DDO/LA DIVISION CUBA OPERATIONS GROUP WH AREA				WASH., D.C.					
10 POSITION TITLE				11 POSITION NUMBER		12 SERVICE DESIGNATION			
OPERATIONS OFFICER				CG66		D2G			
14 CLASSIFICATION SCHEDULE (CS) (LCS)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE			
GS		0136.01		13 1		24308			
18 REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 AUTHORITY CODE	20 DATE OF BIRTH	21 STATION CODE	22 AUTHORITY CODE	23 MOVED	24 DATE OF BIRTH	25 PAY OR GRADE	26 DATE OF IN.		
22 10 51500 LA	51500 10 75013	LA	1	00 00 10	00 00 10	01 30 77	01 30 77		
27 AUTHORITY CODE	28 SPECIAL REFERENCE	29 REINFORCEMENT DATA	30 SEPARATION DATA	31 SEPARATION DATA	32 CONVERSION INFORMATION	33 SECURITY INFORMATION	34 SECURITY INFORMATION		
00 00 10	10 00 00	10 00 00	00 00 00	00 00 00	00 00 00	00 00 00	00 00 00		
35 AUTHORITY CODE	36 TURNOVER DATE	37 TURNOVER DATE	38 CLASSIFICATION	39 TURNOVER DATE	40 TURNOVER DATE	41 TURNOVER DATE	42 TURNOVER DATE		
00 00 10	00 00 00	00 00 00	00 00 00	00 00 00	00 00 00	00 00 00	00 00 00		
43 AUTHORITY CODE	44 AUTHORITY CODE	45 AUTHORITY CODE	46 AUTHORITY CODE	47 AUTHORITY CODE	48 AUTHORITY CODE	49 AUTHORITY CODE	50 AUTHORITY CODE		
00 00 10	00 00 10	00 00 10	00 00 10	00 00 10	00 00 10	00 00 10	00 00 10		
SIGNATURE OF ISSUED AUTHORITY ACTION									

0000 1000 0000 0000

0000 1000 0000 0000

0000 1000

0000 1000 0000 0000

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(When Filled In)

OCF		NOTIFICATION OF PERSONNEL ACTION							
1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)								
036130	FLORES DANIEL								
3 NATURE OF PERSONNEL ACTION				4 EFFECTIVE DATE	5 CATEGORY OF EMPLOYMENT				
REASSIGNMENT				12 04 76	REGULAR				
6 FUNDS	V TO V CF TO V	V TO CF X CF TO CF	7 PAY AND NSCA		8 CSC OR OTHER LEGAL AUTHORITY				
			7135 4534	00000	50 USC 403 J				
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION					
DDO/LA DIVISION CUBA OPERATIONS GROUP WH AREA				WASH., D.C.					
11 POSITION TITLE				12 POSITION NUMBER	13 SERVICE DESIGNATION				
OPERATIONS OFFICER				CC67	DQG				
14 CLASSIFICATION CODES (15 thru 18)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP	17 SALARY OR RATE				
GS		0136.01		12.4	22485				
18 REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ADDRESS & PHONE #1 OFFICE CODE		20 STATION CODE	21 INTERVIEW CODE	22 Grade Code	23 Date of Birth	24 Date of Grade	25 Date of Ent.	26 SECURITY REG NO	27 SSI
37	10 515061-A	75013	1	000 00 00	00 00 00	00 00 00	00 00 00	00 00 00	00 00 00
20 MTS EXP. DATES		20 SEPARATION DATA		21 SEPARATION DATA CODE		22 Correction / Compensation Data		23 SECURITY REG NO	
00 00 00	00 00 00	00 00 00	00 00 00	0000	0000	00 00 00	00 00 00	00 00 00	00 00 00
24 VIT INFORMATION		25 SEV CRED. EARNED COMM / CHGP DATE		26 CARRIER CLAIMS		27 FEAT / HEALTH INSURANCE		28 SOCIAL SECURITY NO	
7000	000 00 00	000 00 00	000 00 00	0000	0000	0000	0000	0000	0000
29 PENSION CONVERSIONS / MOVES		30 LEAVE CAT		31 PLEALED TAX DATA		32 STAN TAX DATA			
1. ANNUAL RETIREMENT 2. ANNUAL IN RETIREMENT 3. CARRY ON SERVICE AND RETIRE IN RETIRE 4. CARRY ON SERVICE AND RETIRE IN RETIRE		CODE		0000 0000 0000		0000 0000 0000		0000 0000 0000	
SIGNATURE OR OTHER AUTHENTICATION									
PIT									

1. SERIAL NO.	NAME			2. CONTRACT NUMBER	3. PAY RATE	4. PAY PERIOD	5. PAYMENT DATE			
4-1133	JAMES A. TEE			11-000						
6. END SALARY RATE				7. NEW SALARY RATE			8. PAY PERIOD			
Grade	Step	Name	IN EFFECT DATE	Grade	Step	Salary	EFFECTIVE DATE	WGT	QSL	ADJ
5	3	62.2422	11/23/79	5	3	62.2422	12/23/79			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE-NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE							DATE			
<input type="checkbox"/> NO EXCESS IWOP <input type="radio"/> <input type="radio"/> <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IWOP STATUS AT END OF WAITING PERIOD										
CLERK'S INITIALS										

PRAY REAJUSTANT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF  
TITLE 5, U.S.C. AND EXERCISES THEREIN RESPECTIVE TO ALIENAGE OF  
THE 25 PROVIDED IN THE LAW ACT OF 1945. IS ANTIETAM, THE FED  
DIRECTIVE DATED 8 OCTOBER 1962.

EFFECTIVE DATE OF DAY REGISTRATION: 16 OCTOBER 1970

ROPE  
TICKETS ISSUED

WWS: 19 JULY 76

SECRET  
When filled in

ACF

## NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)						
A36132		FLORES DANIEL						
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT - CHANGE OF FUNCTIONAL CATEGORY</b>				4. EFFECTIVE DATE MO DA YE 16 24 76	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>			
6. FUNDS ➡		V TO V	V TO CF	7. PAY AND NSCA T175 301A JAWD 50 USC 433 J				
8. ORGANIZATIONAL DESIGNATIONS  <b>DUA/OTR FUNCTIONAL TRAINING DIVISION OPERATIONS TRAINING BRANCH</b>				9. LOCATION OF OFFICIAL STATION  <b>WASH., D.C.</b>				
11. POSITION TITLE  <b>INSTRUCTOR OPS</b>				12. POSITION NUMBER BD33	13. SERVICE DESIGNATION DQG			
14. CLASSIFICATION SCHEDULE CODE (16. 64)		15. OCCUPATIONAL SERIES GS		16. GRADE AND STEP 1712.32	17. SALARY OR RATE 12 3 26078			
18. REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION	20. EMPLOYEE CODE	21. OFFICE CODING CODE	22. STATION CODE	23. INTEREST CODE	24. INDUCTION CODE	25. DATE OF BIRTH MO DA YE	26. DATE OF GRADE MO DA YE	27. DATE OF SEI MO DA YE
37	13	175JU	75J13	1				
28. RATE EXPIRES MO DA YE	29. SPECIAL REFERENCE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CONVERSION / COMBINATION DATA TYPE	MO DA YE	33. SECURITY REQ NO.	34. SEX	
35. VET PREFERENCE	36. SDIV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FEDERAL / HEALTH INSURANCE	40. SOCIAL SECURITY NO			
CODE								
3. REG 8 PT 10 PT	MO DA YE	MO DA YE	GAO ESD COCA EPON LAMP	COCA 0 OWNED 1 RENT	HEALTH INS COCA			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA					
CODE	0. NO PREVIOUS SERVICE 1. ONE BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 YEARS 3. BREAK IN SERVICE GREATER THAN 3 YEARS	MOB ELIGIBLE COCA 1 YES 2 NO	NO TAX EXEMPTIONS 1 YES 2 NO	LEAD EXPENSES 1 YES 2 NO	CODE	NET TAX EXEMPT	STATE COCA	
SIGNATURE OR OTHER AUTHENTICATION  <i>John</i> AFQ								

FROM: LA

FWSB 1150  
8/7/80 10:00 AMUse Previous  
Edition

80-100107 CL 01 00748 00 000

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11883 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 12 OCTOBER 1975

NAME	SERIAL	URGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 2	\$20,032

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11881 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 OCTOBER 1974

NAME	SERIAL	URGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51	500	CF GS 12 1	\$18,463

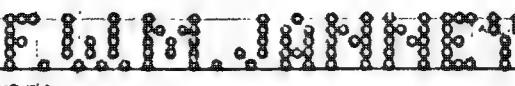
FOR PURPOSES OF THE FAIR LABOR STANDARDS ACT, AS AMENDED,  
YOU ARE DESIGNATED EXEMPT.

EFFECTIVE DATE OF DESIGNATION: 01 MAY 1974.

FLORES DANIEL

036130

41351084

1. SERIAL NO	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
036130	FLORES DANIEL	\$1 500	CF						
6. OLD SALARY RATE				7. NEW SALARY RATE	8. TYPE ACTION				
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
3 12	2	\$19,070	11/24/74	3 12	3	\$19,693	11/23/75		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE									
SIGNATURE					DATE				
<input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS 									
NEW PAY \$19,693 PAY CHANGE NOTIFICATION									

SECRET  
(When Filled In)

DDU: 10 SEP 75

NOTIFICATION OF PERSONNEL ACTION											
1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE) 130111 FLORES DANIEL										
3 NATURE OF PERSONNEL ACTION CONVERSION FROM <input type="text"/> STATUS				4 EFFECTIVE DATE MO DA YR 75 14 75	5 CATEGORY OF EMPLOYMENT REGULAR						
6 FUNDS 	V TO V		V TO CF	7. PAN AND NSCA 61351571			8 CSC OR OTHER LEGAL AUTHORITY 5 USC 473 J				
9 ORGANIZATIONAL DESIGNATIONS SDO/LA DIVISION CUSA OPERATIONS GROUP OPS BRANCH				10 LOCATION OF OFFICIAL STATION WASIL, D.C.							
11 POSITION TITLE OPERATIONS OFFICER				12 POSITION NUMBER CQ65			13 SERVICE DESIGNATION DQB				
14 CLASSIFICATION SCHEDULE (GS, LS, etc.) GS			15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12 2		17 SALARY OR RATE 19370				
18 REMARKS WASIL, D.C.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE 56	20 EMPLOYEE CODE 11	21 OFFICE CODING NUMBER: 51571 ALPHABETIC: LA		22 STATION CODE 7513	23 INTRIGUE CODE 1	24 HEDGES CODE 1	25 DATE OF BIRTH <input type="text"/>	26 DATE OF GRADE MO DA YR NO NO YR	27 DATE OF LEI MO DA YR NO NO YR		
28 MTE EXPIRES NO DA YR		29 SPECIAL REFERENCE 1 CSC 2 FICA 3 HGA 4 HMO	30 RETIREMENT DATA <input type="text"/> CODE		31 SEPARATION DATA CODE <input type="text"/> TYPE	32 Correction / Cancellation Data <input type="text"/> TYPE	33 SECURITY REQ. NO  EOD DATA	34 SEX <input type="text"/>			
35 VET PREFERENCE CODE 0 NONE 1 100% 2 100% 3 100%		36 SERV COMP DATE MO DA YR NO DA YR	37 LONG COMP DATE MO DA YR NO DA YR	38 CAREER CATEGORY CAB 200 PROV 300	39 FEGL / HEALTH INSURANCE CODE 0 WAMER 1 TBS	40 MEDICAL CODE <input type="text"/>	41 SOCIAL SECURITY NO <input type="text"/>				
42 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 BREAK IN SERVICE 2 BREAK IN SERVICE DATES SHOWN 3 YES 3 BREAK IN SERVICE DATES SHOWN 3 YES				43 LEAVE CAT CODE <input type="text"/>	44 FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO			45 STATE TAX DATA CODE 1 NO TAX 2 NO	STATE CODE <input type="text"/>		
SIGNATURE OR OTHER AUTHENTICATION 											
POSTED 19 SEP 75 											

L5-42

1. SERIAL NO	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS						
036130	FLORES DANIEL	51 900	CF							
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION						
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	WGI	QSI	ADJ.
GS 12	1	<b>18,463</b>	<del>11/25/73</del>	GS 12	2	<b>19,078</b>	<del>11/24/74</del>			
CERTIFICATION AND AUTHENTICATION										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE										
SIGNATURE						DATE				
<input checked="" type="checkbox"/> NO EXCESS LWOP      6      0 <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD										
CLERKS INITIALS										

LMP: 27 SEPT 74

SECRET  
(When Filled In)

BDF		NOTIFICATION OF PERSONNEL ACTION									
1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)										
036138	FLORES DANIEL										
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>					4 EFFECTIVE DATE MO DA YR <b>09 15 74</b>	5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>					
6 FUNDS 	V TO V  CF TO V	V TO CF  X CF TO CF	7 PAY AND NSCA <b>5135 4534 8888</b>			8 CSC OR OTHER LEGAL AUTHORITY <b>50 USC 403 J</b>					
9 ORGANIZATIONAL DESIGNATIONS  <b>DDO/WH DIVISION WH/COG OPS BRANCH</b>					10 LOCATION OF OFFICIAL STATION  <b>WASH., D.C.</b>						
11 POSITION TITLE  <b>OPS OFFICER</b>					12 POSITION NUMBER <b>1159</b>	13 SERVICE DESIGNATION <b>DQB</b>					
14 CLASSIFICATION SCHEDULE (GS, LS, etc.)  <b>GS</b>			15 OCCUPATIONAL SERIES  <b>0136.01</b>		16 GRADE AND STEP  <b>12 1</b>	17 SALARY GS RATE  <b>17497</b>		18 REMARKS  <b>WASH., D.C.</b>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19 ACTION CODE <b>37</b>	20 Employer Code <b>18</b>	21 OFFICE CODING NUMBER <b>51588</b>		22 STATION CODE ALPHABETIC <b>WH</b>	23 INTERFEE CODE  <b>75813</b>	24 Major Code  <b>1</b>	25 DATE OF Birth MO DA YR  <b>NO DA 70</b>	26 DATE OF Grade MO DA YR  <b>NO DA 70</b>	27 DATE OF Left MO DA YR  <b>NO DA 70</b>		
28 RETIREES MO DA YR  <b>NO DA 70</b>		29 SPECIAL REFERENCE		30 RETIREMENT DATA CODE  <b>1 CSC 2 COA 3 PICA 4 NEHC</b>		31 SEPARATION DATA CODE TYPE  <b>PPR</b>	32 Correction / Correction Data MO DA YR  <b>NO DA 70</b>	33 SECURITY REQ NO  <b>100 DATA</b>	34 TEL		
35 VET PREFERENCE CODE  <b>1 HOME 2 AP 3 10 PM</b>		36 SERV COMP DATE MO DA YR  <b>NO DA 70</b>		37 LONG COMP DATE MO DA YR  <b>NO DA 70</b>		38 CAREER CATEGORY CODE  <b>CAB 0000 0000 0000</b>	39 REGU / MED / INSURANCE CODE  <b>0 MAILED 1 PSS</b>	40 SOCIAL SECURITY NO CODE  <b>000-00-0000</b>			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE  <b>1 NO PREVIOUS SERVICE 2 NO BREAK IN SERVICE 3 BREAK IN SERVICE (LESS THAN 3 yrs) 4 BREAK IN SERVICE (MORE THAN 3 yrs)</b>				42 LEAVE CAT CODE  <b>0000</b>		43 FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO	44 STATE TAX DATA FORM EXECUTED 1 YES 2 NO	CODE  <b>0000</b>	MO DA YR  <b>NO DA 70</b>	STATE TAX CODE  <b>0000</b>	
SIGNATURE OR OTHER AUTHENTICATION  <b>POSTED</b>  <b>JK 9/27/74</b>											

SECRET  
(When Filled In)

AUG 19 APR 74

NOTIFICATION OF PERSONNEL ACTION

SERIAL NUMBER	NAME (LAST FIRST MIDDLE) J. J. FLORES DAVIDEL						
3. NATURE OF PERSONNEL ACTION CLASSIFICATION				4. EFFECTIVE DATE NO 04 74 -7 04 74	5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS	V TO V		V TO CP	7. PAY AND NSCA \$155 453N	8. CSC OR OTHER LEGAL AUTHORITY 3 USG 4.3 J		
9. ORGANIZATIONAL DESIGNATIONS SOC/AMM DIVISION Int/COG OPS SUPPORT BRANCH				10. LOCATION OF OFFICIAL STATION WASH., D.C.			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 1134	13. SERVICE DESIGNATION DOS		
14. CLASSIFICATION SCHEDULE (OS, LS, etc.) CS		15. OCCUPATIONAL SERIES A130.71	16. GRADE AND STEP 12 1	17. SALARY OR RATE 174.97			
18. REMARKS LIMA, PERU							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
18. ACTION CODE 37	19. ENTRANCE CODE 51500	20. OFFICE CODING ALPHABETIC W.E.	21. STATION CODE 75.13	22. INITIATIVE CODE 1	23. PAYROLL CODE 1	24. DATE OF BIRTH 1940 04 10	25. DATE OF GRADE 1940 04 10
26. PAY BASIS HO	27. SPECIAL REFERENCE 1 ECE 2 PSC 3 HRS 4 HRS	28. SEPARATION DATA CODE CODE	29. SEPARATION/COMPLETION DATE 1979	30. COMPLETION/COMPLETION DATE 1979	31. SECURITY REG NO	32. SOC SEC NO	
33. RET PREFERENCE HRS	34. NEW COMP DATE HO 04 74	35. LONG COMP DATE HO 04 74	36. CAREER CATEGORY 140 1410 1420	37. FEHL / HEALTH INSURANCE 1400 1401 1402	38. SOC SEC NO	39. SOC SEC NO	
40. PREVIOUS GOVERNMENT SERVICE 1 2 3 4	41. LEADS CAT CODE CODE	42. FEDERAL TAX DATA CODE 1400 1401 1402	43. FEDERAL TAX DATA 1400 1401 1402	44. STATE TAX DATA 1400 1401 1402	45. STATE TAX DATA 1400 1401 1402	46. STATE TAX DATA 1400 1401 1402	
SIGNATURE OR OTHER AUTHENTICATION <b>POSTED</b> <i>OK 5/18/74</i>							

DMS: 27 JUN 71

SECRET  
(When Filled In)

## NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)							
375134	4 FLORIS DANIEL							
3 NATURE OF PERSONNEL ACTION		4 EFFECTIVE DATE	5 CATEGORY OF EMPLOYMENT					
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM		MO DA YE	REGULAR					
6 FUNDS	V TO V	V TO CS	7 PAY AND NSCA					
	C TO V	%	8 CSC OR OTHER LEGAL AUTHORITY					
	C TO CS		4135 1394 314 PL 32-643 SECT. 263					
9 ORGANIZATIONAL DESIGNATIONS		10 LOCATION OF OFFICIAL STATION						
DDO/HQ DIVISION								
11 POSITION TITLE		12 POSITION NUMBER	13 SERVICE DESIGNATION					
			O					
14 CLASSIFICATION SCHEDULE (TIG 18 OR 1)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP					
			12					
17 REMARKS		18 EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION, AND RIGHT OF APPEAL TO THE DIRECTOR OF CENTRAL INTELLIGENCE.						
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19 ACTION CODE	20 Employee Code	21 PAYROLL CODES	22 STATION CODE	23 RETIREE CODE	24 INDIVIDUAL CODE	25 DATE OF BIRTH	26 DATE OF PAYMENT	27 DATE OF LEAVE
		NUMBER ALPHABETIC				MO DA YE	MO DA YE	MO DA YE
28 PAY EARNERS		29 PAYMENT DIFFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CSCA	32 Correction /Constitution Data	33 SECURITY REG NO		34 SOC SEC NO
MO DA YE		EV	CSCA	EV	MO DA YE	300 DATA		
35 VET PREFERENCE		36 WPA COMP DATE	37 LONG COMP DATE	38 CAGED CATEGORY	39 FEDERAL / HEALTH INSURANCE	40 SOCIAL SECURITY NO		
CAGE		0 0000 0000 00	0 0000 0000 00	0 0000 0000 00	0 0000 0000 00			
41 PREVIOUS CIVILIAN EMPLOYMENT STATUS		42 LEAVE CAT CODE	43 FEDERAL TAX DATA	44 STATE TAX DATA				
1. NO RECENT CIVILIAN STATUS 2. NO RECENT CIVILIAN STATUS 3. RECENT CIVILIAN STATUS 4. RECENT CIVILIAN STATUS			0000 0000 0000 0000	0000 0000 0000 0000				
SIGNATURE OR OTHER AUTHENTICATION				POSTED				
				OK 20 JUN 1971				

WCHIT

1000 1000 1000 1000

BB

SECRET  
(When Filled In)

339 03 DEC 73

NOTIFICATION OF PERSONNEL ACTION

OPF.

1. SER AL NUMBER	2. NAME (LAST FIRST MIDDLE)							
030130	FLORES DANIEL							
3. NATURE OF PERSONNEL ACTION								
PROMOTION								
4. RANKS	V TO V	V TO CF						
	CF TO V	X CF TO CF						
5. ORGANIZATIONAL DESIGNATIONS								
DDO/WH DIVISION FOREIGN FIELD BRANCH 3 STATION								
11. POSITION TITLE		12. POSITION NUMBER						
OPS OFFICER		0136						
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES						
GS		0130.01						
16. GRADE AND STEP								
17. SALARY OR RATE								
18. REMARKS								
HOME BASE: WH								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRIE CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
22	10	51700 WH	57085		3		11 25 73	11 25 73
28. MIE EXP-405		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. Correction - Commutation Date			33. SECURITY REQ. NO
					TIME	MO DA YR		34. SEA
35. VET PREFERENCE		36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. REGI. HEALTH INSURANCE	40. SOCIAL SECURITY NO		
1044 1 4 24 1 5 24 1 10 24		MO DA YR	MO DA YR	FAB REGI CODE	1044 0 0000 0000			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA				
1. NOT PREVIOUS SERVICE 2. NOT RECENT IN SERVICE 3. RECENT IN SERVICE (LAST THREE 3 yrs) 4. RECENT IN SERVICE (LAST 1 yr)			ADDITIONAL 1 100 2 100	AD. TAX EXEMPTIONS 1 100 2 100	ADDITIONAL 1 100 2 100	AD. TAX EXEMPTIONS 1 100 2 100	STATE TAX CODE	
SIGNATURE OR OTHER AUTHENTICATION								
1044-12-4-73								

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 14 OCTOBER 1973

NAME	SERIAL ORGN. FUNDS GR-STEP	NEW SALARY
FLURES DANIEL	036130 51 760 CF GS 11 4	\$16,130

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER 11691 PURSUANT TO ALTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJLSTMENT: 07 JANUARY 1973

NAME	SERIAL ORGN. FUNDS GR-STEP	NEW SALARY
FLURES DANIEL	036130 51 760 CF GS 11 4	\$15,394

655

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. EMPLOYEE NUMBER				
036130	FLORES DANIEL	51 760	CF					
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION				
Grade	Step	Salary	EFFECTIVE DATE	SI ADI				
GS 11	3	\$14,19	11/20/71	GS 11	3	\$14,64	11/20/72	SI ADI
CERTIFICATION AND AUTHENTICATION								
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.								
SIGNATURE				DATE		8 September 1972		
<input type="checkbox"/> NO EXCESS EWOP		<input checked="" type="checkbox"/>		<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD		<input type="checkbox"/> EWOP STATUS AT END OF WAITING PERIOD		11/20 561
CLERK'S INITIALS						AUDITED BY		
FORM 766 560 E <small>Use previous editions</small>				PAY CHANGE NOTIFICATION		WLB		(4-51)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1969, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
FLORES DANIEL	036130	51 760	CF	GS 11 3	\$14,647

GS: 8 DEC 71

SECRET

(When Filled In)

ODF

## NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)		4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT		
036130		FLORES DANIEL		MO	DA	YY	REGULAR	
3 NATURE OF PERSONNEL ACTION				11	28	71		
PROMOTION				7 Financial Analysis No Chargeable		8 CSC OR OTHER LEGAL AUTHORITY		
<input checked="" type="checkbox"/> FUNDS → <input type="checkbox"/> CPT TO V <input checked="" type="checkbox"/> X      CPT TO CT				2135 1084 0000		50 USC 403 J		
9 ORGANIZATIONAL DESIGNATIONS				10 LOCATION OF OFFICIAL STATION				
DUP/WH DIVISION FOREIGN FIELD BRANCH 3, [REDACTED] STATION								
11 POSITION TITLE				12 POSITION NUMBER		13 SERVICE DESIGNATION		
OPS OFFICER				0136		O		
14 CLASSIFICATION SCHEDULE (GS, ETC.)		15 OCCUPATIONAL SERIES		16 GRADE AND STEP		17 SALARY OR RATE		
GS		0136.01		11 3		13457		
18 REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19 ACTION CODE	20 Employee Code	21 OFFICE CODING	22 STATION CODE	23 INTEGEE CODE	24 Master Code	25 DATE OF BIRTH	26 DATE OF GRADE	27 DATE OF LEI
22	10	51760 WH	57085	[REDACTED]	3	MO DA YY	11 28 71	11 28 71
28 PAY EXPIRES		29 SPECIAL REFERENCE	30 RETIREMENT DATA	31 SEPARATION DATA CODE	32 Contraction / Continuation Data	33 SECURITY REG NO		34 SEA
<input type="checkbox"/> MO <input type="checkbox"/> DA <input type="checkbox"/> YY					TERM	MO DA YY		EOD DATA →
35 PAY PREFERENCE		36 SERV COMP DATE	37 LONG COMP DATE	38 CAREER CATEGORY	39 FEGLI / HEALTH INSURANCE	40 SOCIAL SECURITY NO		
<input type="checkbox"/> HIRING <input type="checkbox"/> LIP <input type="checkbox"/> LIP <input type="checkbox"/> LIP		MO DD YY	MO DD YY	CAR DRSY ADY PERM	LIC/CA LIC/CA S. WITNESS YES			
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE	43	FEDERAL TAX DATA		44 STATE TAX DATA		
<input type="checkbox"/> 1. NO PREVIOUS SERVICE <input type="checkbox"/> 2. NO DATES OR NAMES <input type="checkbox"/> 3. DATES OR NAMES LESS THAN 2 yrs <input type="checkbox"/> 4. DATES OR NAMES MORE THAN 2 yrs				FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE NO TAX EXEMPT STATE CODE
				1 YES 2 NO			1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION								
<div style="border: 1px solid black; padding: 5px; text-align: center;">POSTED <i>12-9-71</i></div>								

POB# 1190  
Date 8-73Use Previous  
Edition

SECRET

PPG

12-9-71  
DA FORM 1 - 4-72  
Distribution  
(When Filled In)

**SECRET**

WEB: 29 SEPT 71

<b>NOTIFICATION OF PERSONNEL ACTION</b>												
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)										
036130		FLORES DANIEL										
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT						
REASSIGNMENT				09 19 71		REGULAR						
6. FUNDS ➡		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSL OR OTHER LEGAL AUTHORITY				
		CF TO V	X	CF TO CF		2135 1084 0000		50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION										
DDP/WH FOREIGN FIELD BRANCH 3		STATION										
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION						
OPS OFFICER				0136		D						
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR PAY						
GS		0136.01		10 3		12285						
18. REMARKS. GUAYAQUIL, ECUADOR												
HOME BASE: WH												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTERCODE CODE	24. MARITAL STATUS	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI			
37	10	51700 WH		57085	3	W/M	MO DA 18	MO DA YE	MO DA YE			
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RET-REMENT DATA		31. SEPARATION DATA CODE	32. COMBINATION	33. SECURITY REQ. NO	34. SEA				
XX XX XX			1 CSC 2 CCA 3 CEA 4 NCNA		COLN	COMBINATION DATA	EOB DATA ➡					
35. VET PREFERENCE		36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORIES	39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO					
CODE 0 AGONE 1 3 PT 2 10 PT		MO DA 18	MO DA YE	CAR NEW COIN PROV TEMP	LAST 0 AGNE 0 TES	HEALTH INS CODE						
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA								
CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 yrs 3 BREAK IN SERVICE MORE THAN 3 yrs			FEDERAL TAX DATA	STATE TAX DATA								
SIGNATURE OR OTHER AUTHENTICATION												
												

FORM 1150  
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Use Previous Edition

**SECRET**

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MAILED

1. SERIAL NO.	2. NAME			3. ORGANIZATION	4. FUNDS	5. LWOP HOURS			
036130	FLURES DANIEL			51 700	CF				
6. OLD SALARY RATE				7. NEW SALARY RATE		8. TYPE ACTION			
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 10	2	\$11,901	07/26/70	GS 10	3	\$12,295	07/25/71		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE							DATE 6 May 1971		
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS <b>H.C.</b>				AUDITED BY <b>J.H.</b>					
FORM 7-66 560 E Use previous editions		PAY CHANGE NOTIFICATION							
		(4-51)							

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL ORGN, FUNDS GR-STEP	NEW SALARY
FLURES DANIEL	036130 51 700 CF GS 10 2	\$11,901

BSJ: 10 AUG 70

**SECRET**  
(When Filled In)

**NOTIFICATION OF PERSONNEL ACTION**

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036136		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION											
PROMOTION											
4. FUNDS		V TO V		V TO CF	5. EFFECTIVE DATE		6. CATEGORY OF EMPLOYMENT				
				X	MO DA YR 07 26 70	REGULAR					
7. Length of Analysis No Chargeable											
8. CSC OR OTHER LEGAL AUTHORITY											
1135 0884 0000 50 USC 403 J											
9. ORGANIZATIONAL DESIGNATIONS											
DDP/WH FOREIGN FIELD BRANCH 3											
10. LOCATION OF OFFICIAL STATION											
STATION BASE											
11. POSITION TITLE						12. POSITION NUMBER			13. SERVICE DESIGNATION		
OPS OFFICER						0376			D		
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		IN 2		11231			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Employer Code	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. Month Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
22	IN	51700	WH	19559		3	MO DA YR 07 26 70	MO DA YR 07 26 70	MO DA YR 07 26 70		
28. INTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction / Correction Data		33. SECURITY REG NO	34. SDA
MO DA YR 07 25 72		21		1 CSC 2 CIA 3 FCA 4 USAID	CODE	1979	MO DA YR		EOD DATA		
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGL / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE 0 NO 1 PT 2 TO PT		MO DA YR MO DA YR		MO DA YR MO DA YR		CAB 00000 PROV 00000		0 MAILED 1 FED 2 NO		0 MAILED 1 FED 2 NO	
41. PREVIOUS U.S. GOVERNMENT SERVICE						42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA	
CODE 0 NO PREV U.S. SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 mos. 3 BREAK IN SERVICE 3 mos. or more								FORM EXECUTED 1 YES 2 NO		FORM EXECUTED 1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION											
JULY 1970											
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1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS
036130	FLURIS DANIEL	51 700	CF	
6. OLD SALARY RATE			7. NEW SALARY RATE	
Grade	Step	Salary	Last Eff. Date	Grade Step Salary Effective Date
GS 09	2	\$ 9,632	04/06/69	GS 09 3 \$ 9,942 04/03/70
8. TYPE ACTION				
SI	ADJ.			
CERTIFICATION AND AUTHENTICATION				
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.				
SIGNATURE	DATE			
<input type="checkbox"/> NO EXCESS LWOP      0 <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD				
1 545 CICKED INITIALS E. M. HILLE				
AUDITED BY				
FORM 7-60 560 E Use previous editions PAY CHANGE NOTIFICATION JRC (4-81)				

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-204 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENTS 13 JULY 1969

NAME	SERIAL ORGN. FUNDS GR-STEP	NET SALARY
FLORES DANIEL	036130 51 700 CF GS 09 2	8 96631

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11924 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENTS 29 DECEMBER 1969

NAME	SERIAL ORGN. FUNDS GR-STEP	NET SALARY
FLORES DANIEL	036130 51 700 CF GS 09 2	8102210

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JLC: 24 APR 69

(When Filled In)

## NOTIFICATION OF PERSONNEL ACTION

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1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)						
036130	FLORES DANIEL						
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE				
			04 10 69				
			5 CATEGORY OF EMPLOYMENT				
			REGULAR				
6 FUNDS ➤		V TO V	V TO CF				
		CF TO V	X CF TO CF				
7 PERSONNEL ACTIONS NOT Chargeable			8 CSC OR OTHER LEGAL AUTHORITY				
9 ORGANIZATIONAL DESIGNATIONS			9135 0884 0000 50 USC 403 J				
DDP/WH FOREIGN FIELD BRANCH 3			10 LOCATION OF OFFICIAL STATION				
STATION BASE							
11 POSITION TITLE			12 POSITION NUMBER				
OPS OFFICER			0376				
14 CLASSIFICATION SCHEDULE (OS, LS, etc.)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP				
GS		0136,01	17 SALARY OR RATE				
18 REMARKS							
MARITAL STATUS: MARRIED							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE	20 Empl. Code	21 OFFICE CODING	22 STATION CODE	23 INTEGRIE CODE	24 MARINE CODE	25 DATE OF BIRTH	26 DATE OF GRADE
55	10	51700 WH	19559		W0 DA 10	003 04 10	W0 DA 10
26 RATE EXPRIES		27 SPEC AL REFERENCE	28 RETIREMENT DATA	29 SEPARATION DATA CODE	30 Correction /Conciliation Data	31 SECURITY REG NO	
W0 DA 10			CLIP			32 SOC SEC ID NO	
33 VET PREFERENCE		34 SEVY COMP DATE	35 LONG COMP DATE	36 CAREER CATEGORY	37 PEGAT - HEALTH INSURABILITY	38 SOC SEC ID NO	
L000		W0 DA 10	W0 DA 10	L000 R000	W0 DA 10	W0 DA 10	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE			42 LEAVE CAT CODE	43 FEDERAL TAX DATA	44 STATE TAX DATA		
CODE				W000 R000 C000	W000 R000 C000		
				1 000 2 000	1 000 2 000		
				3 000	3 000		
39 SIGNATURE OR OTHER AUTHENTICATION							
PLW							
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Page 11 of 11  
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Editorial Staff

JLB: 22 APR 69

**NOTIFICATION OF PERSONNEL ACTION**

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NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION		PROMOTION, TRANSFER TO CONFIDENTIAL FUNDS AND CHANGE OF SERVICE DESIGNATION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
						05-06-68		REGULAR			
6. FUNDS		V TO V	X	P TO CP		7. CLASSIFICATION/CHARGE		8. CSC OR OTHER LEGAL AUTHORITY			
		C TO V	X	C TO CP		2135 0204 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP/WH FOREIGN FIELD BRANCH 3											
11. POSITION TITLE		12. POSITION NUMBER				13. SERVICE DESIGNATION					
OPS OFFICER		0375				D					
14. CLASSIFICATION SCHEDULE (1A, 1B, 1C)		15. OCCUPATIONAL SERIES				16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01				GS 2		8744			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODE/NUMBER		22. STATE CODE	23. NATIONAL CODE	24. MONTH CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES		
20	10	51700	WH	1955		3	06 06 68	04 06 69	04 06 69		
28. RATES ENTERED		29. SPECIAL REFERENCE		30. DEPARTMENT DATA		31. SEPARATION DATA CODE		32. Classification / Compensation Units		33. SECURITY REQ NO	
30. VET PREFERENCE		31. SERV COMB DATE		32. LONG COMB DATE		33. CAREER CATEGORIES		34. MEDICAL / HEALTH INSURANCE		35. SOCIAL SECURITY NO	
LEAD		00 00 70		00 00 70		0000 0000		0000 0000		0000 0000	
36. PREVIOUS CHANGES IN GOVERNMENT SERVICE		37. MAIL CAT		38. FEDERAL TAX DATA		39. STATE TAX DATA					
1. NEW PERIOD IN SERVICE 2. END OF TERM OF SERVICE 3. RECALL TO SERVICE AFTER TERMINATION 4. RECALL TO SERVICE BEFORE TERMINATION		CSCA		MAIL NUMBER 1. 000 2. 000		FEDERAL TAX DATA 1. 000 2. 000		STATE TAX DATA 1. 000 2. 000			
SIGNATURE OR OTHER AUTHENTICATION											
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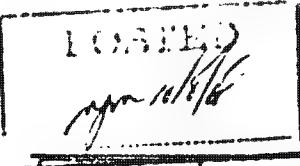
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OCC		NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)										
036130	FLORES DANIEL										
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT					10 06 68	REGULAR					
6. FUNDS	X	V TO V		V TO CF	7. Financial Analysis No. Changeable			8. CSC OR OTHER LEGAL AUTHORITY			
		CF TO V		CF TO CF	9235 0620 0000			50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION						
DDP/WH BRANCH 4					WASH., D.C.						
11. POSITION TITLE					12. POSITION NUMBER	13. SERVICE DESIGNATION					
OPS OFFICER					1441	SJ					
14. CLASSIFICATION SCHEDULE (GS, LS, GS)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP	17. SALARY OR RATE					
GS			0136.01		08 2	7956					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Empltyy Code	21. OFFICE CODING		22. STATION CODE	23. INITIATOR CODE	24. Initiator Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES		
37	10	NUMBER	ALPHABETIC	75013		1	MM DD YY	MM DD YY	MM DD YY		
28. NTS EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction /Complaint Data		33. SECURITY REQ NO	34. SES
										EOD DATA	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGL / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		0. NONE 1. 1 PT 2. 14 PT		MM DD YY		MM DD YY		0. NONE 1. YES		HEALTH INS CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE						42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA	
CODE						0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 yrs 3. BREAK IN SERVICE MORE THAN 3 yrs		0. NO EXEMPT 1. NO		0. NO EXEMPT 1. NO	
SIGNATURE OR OTHER AUTHENTICATION											
FROM CTP											
											

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"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENTS: 14 JULY 1968

NAME	SERIAL ORGN. FUNDS GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130 2B 300 V GS 08 2	\$ 7,630	\$ 7,956

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 8 OCTOBER 1967

NAME	SERIAL ORGN. FUNDS GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130 2B 300 V GS 06 3	\$ 6,263	\$ 6,547

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(When Filled In)

JLB: 24 JUN 68

## NOTIFICATION OF PERSONNEL ACTION

OCC

1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)		
036130	FLORES DANIEL		
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE
PROMOTION			06 16 68
5. FUNDS ➡ X V TO V CPT TO V			6. CSC OR OTHER LEGAL AUTHORITY
CPT TO CF			5275 2100 (REG) 50 USC 403 J
7. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION
ODS/OTR CAREER TRAINING PROGRAM			WASH., D.C.
11. POSITION TITLE			12. POSITION NUMBER
CAREER TRAINEE			0748
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)			15. OCCUPATIONAL SERIES
GS			0090.01
16. GRADE AND STEP			17. SALARY OR RATE
GS 2			7630
18. REMARKS			

## SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF SEI
22	10	28300 CTP	75013	1	MO DA YR	06 16 68	06 16 68	06 16 68
28. INT. EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. COMMISSION / CANCELLATION DATA		33. SECURITY REG. NO.	34. SEA
					TYPE	MO DA YR		
35. VET PREFERENCE		36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO.		
CODE		MO DA YR	MO DA YR	CAR BSH RSV TEMP	CODE COOB 0. WAIVER 1. PBS			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA		
				FORM EXECUTED	CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE NO TAX EXEMPT STATE CODE
				1. YES 2. NO			1. YES 2. NO	

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(When Filled In)

FYD: 15 DEC 57

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)							
030130	FLORIS JANTZ							
3. NATURE OF PERSONNEL ACTION PROMOTION AND CHANGE OF SERVICE DESIGNATION								
4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT							
NO. DA. YR 12 17 57	REGULAR							
6. FUNDS	X	V TO V	V TO CF					
		CF TO V	CF TO CF					
7. Financial Analysis No. Chargeable								
8. CSC OR OTHER LEGAL AUTHORITY 6275 2100 0000 50 USC 403 J								
9. ORGANIZATIONAL DESIGNATIONS								
10. LOCATION OF OFFICIAL STATION WASH., D.C.								
11. POSITION TITLE CAREER TRAINEE		12. POSITION NUMBER 0748	13. SERVICE DESIGNATION SU					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 00000.01	16. GRADE AND STEP 07 2					
17. SALARY OR RATE 00591								
18. REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. Employ Code	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGEE CODE	24. HOURS Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
22	10	2830.0	LTP	75013	1	NO DA YR 12 17 57	NO DA YR 12 17 57	NO DA YR 12 17 57
28. RITE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE	33. SECURITY REG NO	34. SERV COMP DATE	35. LONG COMP DATE	36. SOC SEC NO
NO. DA YR	1-CSC 2-CIA 3-PICA 4-NONE	CODE	NO. DA YR	NO. DA YR	EOD DATA			
37. VET PREFERENCE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO.					
CODE 0 - NONE 1 - GPT 2 - 10 PP	NO DA YR	NO DA YR	NO. DA YR					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA					
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 YEARS 3 - BREAK IN SERVICE MORE THAN 3 YEARS		FORM EXECUTED CODE 0 - YES 1 - NO	FORM EXECUTED CODE 0 - YES 1 - NO					
45. SIGNATURE OR OTHER AUTHENTICATION								
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MAH: 20 SEPT 67

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)						
036130		FLORES DANIEL						
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE						
CHANGE OF COST CENTER NUMBER		NO. DA YR 09 107167						
5. FUNDS		X V TO V	V TO CF					
		CF TO V	CF TO CF					
6. ORGANIZATIONAL DESIGNATIONS		7. Financial Analysis No. Chargeable						
DDP/WH WH/COG INTELLIGENCE BRANCH OPERATIONS SUPPORT SECTION		8. CSC OR OTHER LEGAL AUTHORITY						
11. POSITION TITLE		9. LOCATION OF OFFICIAL STATION						
INTELLIGENCE ASST		WASH., D.C.						
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES						
GS		0301.28						
16. GRADE AND STEP		17. SALARY OR RATE						
06 3		6263						
18. REMARKS								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. Employer Code	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. Migr. Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
37	10	51500	WH	75013	1	NO DA YR	NO DA YR	NO DA YR
28. RTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG NO.	34. SEX		
MO DA YR		Y - CRC Z - CIR A - FICA B - DCA	CODE	TYPE	NO DA YR	EOD DATA		
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE	40. SOCIAL SECURITY NO.			
CODE 0 - VONG 1 - 6 PT 2 - 10 PT	NO DA YR	NO DA YR	CAR H/SV TEMP	CODE 0 - WAIVER 1 - YES	CODE 0 - YES	HEALTH INS CODE		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA					
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 yrs. 3 - BREAK IN SERVICE MORE THAN 3 yrs.		FORM EXECUTED 1 - YES 2 - NO	NO TAX EXEMPTIONS 1 - YES 2 - NO	FORM EXECUTED 1 - YES 2 - NO	CODE 0 - NO TAX EXEMPT	STATE CODE		
SIGNATURE OR OTHER AUTHENTICATION								
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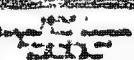
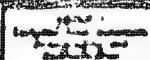
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NOTIFICATION OF PERSONNEL ACTION			
GCS 10/07/67			
1 SERIAL NUMBER	2 NAME (LAST-FIRST-MIDDLE)		
036130	FLORES DANIEL		
3 NATURE OF PERSONNEL ACTION		4 EFFECTIVE DATE	5 CATEGORY OF EMPLOYMENT
CONV. TO CAREER EMPLOYEE STATUS		03 11 65	
6 FUNDS	X V TO V	V TO C	7 FINANCIAL ANALYSIS NO CHARGEABLE
	G TO V	G TO C	8 ESC OR OTHER LEGAL AUTHORITY
9 ORGANIZATIONAL DESIGNATIONS DDP/WH DIVISION		10 LOCATION OF OFFICIAL STATION	
11 POSITION TITLE		12 POSITION NUMBER	13 CAREER SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LS, etc.)		15 OCCUPATIONAL SERIES	16 GRADE AND STEP
			17 SALARY OR RATE
18 REMARKS			
SIGNATURE OR OTHER AUTHENTICATION			
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653

1. Serial No.	2. Name	3. Last Letter Number	4. Excess Hours						
036130	FLORES DANIEL	S1 500 V							
5. OLD SALARY RATE		6. NEW SALARY RATE		7. TYPE ACTION					
Grade	Step	Salary	Grade	Step	Salary	Effective Date	PSI	LSI	ADS
GS 05	3	\$5,523	GS 05	4	\$5,694	03/15/66			
8. Remarks and Authentication									
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>dt</i> AUDITED BY <i>o</i>									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE: <i>E. Flores</i> DATE <i>9 FEB 66</i>									
PAY CHANGE NOTIFICATION									

Form 560E M4 3-65

(6-61)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

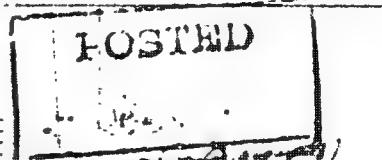
EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORIGIN, FUNDS	GR-S-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	S1 500	V	GS 05 4	\$ 5,694 \$ 5,859

FJH: 21 SEPT 66

SECRET  
(Not Filled In)

69

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)											
036130		FLORES DANIEL											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT						09 19 66		PART TIME					
6. FUNDS		X	V TO V		V TO C	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
			(P TO V)		(P TO C)	7235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DOP/WH WH/C INTELLIGENCE BRANCH OPERATIONAL SUPPORT SECTION						WASH., D.C.							
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION					
INTELLIGENCE CLERK						1176		D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES				16. GRADE AND STEP		17. SALARY OR RATE					
GS		0301.27				05 4		5859					
REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
ACTION CODE	20. EMPLOYEES CODE	21. OFFICE CODING		22. STATION CODE	23. INTERVIEW CODE	24. MARITAL CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI				
7	36	51500 WH		75013	1	NO	DA	TR	NO	DA	TR		
RTS EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA			33. SECURITY REG. NO.	34. SES				
2. DA TR		3. CSC 4. PICA 5. ROME		6. CODE	7. TYPE	NO	DA	TR	ZOD DATA				
35. PREFERENCE	36. SEBY COMP. DATE	37. LONG COMP. DATE		38. CAREER CATEGORY	39. FEE/LI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.						
4. NO 5. LONG 6. SHORT	NO DA TR	NO DA TR		CAP. RES. CCR. PACR. TRMA	CODE	6. DIVIDED	HEALTH INS. CODE						
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA						
42. 1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 3 yrs 4. BREAK IN SERVICE MORE THAN 3 yrs			43. FORM EXECUTED CODE	44. FORM APPROVED CODE		45. FORM EXECUTED CODE	46. FORM APPROVED CODE	47. STATE TAX DATA					
SIGNATURE OR OTHER IDENTIFICATION													
 (When Filed In)													

100 1100 Use Previous Edition

SECRET

1. Executive - no authority  
2. Every day use  
3. Periodicals

(When Filed In)

**SECRET**  
(When Filled In)

RZF: 28 JAN 66

**NOTIFICATION OF PERSONNEL ACTION**

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE									
CHG IN STRENGTH COUNT		01 30 66									
6. FUNDS		X	V TO V		V TO CP	5. CATEGORY OF EMPLOYMENT		PART TIME			
			CP TO V		CP TO CP	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
9. ORGANIZATIONAL DESIGNATIONS		6235 1162 XXXX 50 USC 403 J									
DOP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION		10. LOCATION OF OFFICIAL STATION									
11. POSITION TITLE		WASH., D.C.									
INTELLIGENCE CLERK		12. POSITION NUMBER									
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0301.27		05 3		5523					
18. REMARKS											
THIS ACTION CORRECTS COMPUTER CODING TO REFLECT CHANGE IN STRENGTH COUNT OF PART TIME PERSONNEL IN ACCORDANCE WITH PROVISIONS OF HR-20-10, REVISED 21 DECEMBER 1965.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Employ. Code	21. OFFICE CODING		22. STATION CODE	23. INTEGRATE CODE	24. Grade Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	28. HIRE EXPIRES	29. SPECIAL REFERENCE
33	36	51500 WH		75013		W	MO 04 19	MO 04 19		NO 04 66	1 - EOL 2 - PICA 3 - NONE
30. RETIREMENT DATA		31. SEPARATION DATA		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO		34. SER			
NO 04 66		CODE		DATA CODE		TYPE		NO 04 66		REG NO	
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEES / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		0 - NONE 1 - EPT 2 - 10 PT		NO 04 70 NO 04 70		NO 04 70 NO 04 70		CODE 0 - MAILED 1 - TEMP		CODE 0 - 1000 1 - 100	
41. PREVIOUS GOVERNMENT SERVICE DATA						42. LEAVE CAT. AS		FEDERAL TAX DATA		43. STATE TAX DATA	
CODE						CODE		1 - 100 2 - NO		44. TAX EXEMPTIONS	
										45. TAX EXEMPTIONS	
								46. TAX EXEMPTIONS		47. STATE CODES	
								48. TAX EXEMPTIONS		49. STATE CODES	
50. SIGNATURE OR OTHER AUTHENTICATION											

1088W 11-62

Use Previous  
Edition

SECRET

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**Open Budget Day**

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL A9-301  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	51 500	V	GS 09 3	\$ 5,330	\$ 5,523

**SECRET**  
(When Filled In)

P.M.R. 25 AUG 65

**NOTIFICATION OF PERSONNEL ACTION**

NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)										
0361301		FLORES DANIEL										
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT								
REASSIGNMENT		18 1 25 165		PART TIME								
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY						
		CP TO V	CP TO CP	6235 1162 (XXX)		50 USC 4(13) J						
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION										
DDP/WH WH/C INTELLIGENCE BRANCH REPORTS AND REQUIREMENTS SECTION		WASH., D.C.										
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION								
INTELLIGENCE CLERK		1184		D								
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE						
GS		(0301.27)		05 3		5330						
18. REMARKS												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. Employ Code	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. Height Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI			
37	20	NUMERIC	ALPHABETIC			W	MO DA YR	MO DA YR	MO DA YR			
38. RTE EXPIRES		39. SPECIAL REFERENCE	40. RETIREMENT DATA		41. SEPARATION DATA CODE	42. CORRECTION/CANCELLATION DATA		43. SECURITY REQ. NO	44. SEX			
						TYPE	MO DA YR					
45. VET. PREFERENCE		46. SERV. COMP. DATE		47. LONG COMP. DATE	48. CAREER CATEGORY	49. FEGL / HEALTH INSURANCE	50. SOCIAL SECURITY NO.					
CODE		O - NONE 1 - BPT 2 - 10 PT	MO DA YR	MO DA YR	L49. FEGL CODE	CODE	O - DRIVER 1 - YES	HEALTH INS CODE				
51. PREVIOUS GOVERNMENT SERVICE DATA		52. LEAVE CAT CODE		53. FEDERAL TAX DATA		54. STATE TAX DATA						
CODE		0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 yrs. 3 - BREAK IN SERVICE MORE THAN 3 yrs.		FORM EXECUTED: CODE		NO TAX EXEMPTIONS		FORM EXECUTED	CODE	NO TAX EXEMPT	STATE CODE	
				1 - YES 2 - NO				1 - YES 2 - NO				
SIGNATURE OR OTHER AUTHENTICATION												

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[Use Previous Edition](#)

**SECRET**

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中原書局

1 Serial No	2 Name			3 Cost Center Number			4 LWOP Hours			
036130	FLORES DANIEL			49 190			36F			
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSA	ADJ.
GS 05	2	\$ 5,165	03/15/64	GS 05	3	\$ 5,334	03/14/64			
8 Remarks and Authentication										
<ul style="list-style-type: none"> <li>/ / NO EXCESS LWOP</li> <li>/ / IN PAY STATUS AT END OF WAITING PERIOD</li> <li>/ / LWOP STATUS AT END OF WAITING PERIOD</li> </ul> <p>CLERKS INITIALS <i>JK</i> AUDITED BY <i>JK</i></p>										
<p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: <i>JK</i> DATE: 15 Feb. 1964</p>										
PAY CHANGE NOTIFICATION										

Form 961 360 Obsolete Previous Edition

(4-51)

DLB: 5 FEB 65

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION PAY ADJUSTMENT TO PART TIME FROM FULL TIME						4. EFFECTIVE DATE MO. DA. YR 02 08 65	5. CATEGORY OF EMPLOYMENT PART TIME				
6. FUNDS ➤		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE 5235 1162 0000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS  DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION						10. LOCATION OF OFFICIAL STATION  WASH., D. C.					
11. POSITION TITLE  INTELLIGENCE ASST						12 POSITION NUMBER 1130	13. SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS			15. OCCUPATIONAL SERIES 0301.28			16. GRADE AND STEP 05 2	17. SALARY OR RATE 5165				
18. REMARKS SUBJECT TO WORK ON REGULARLY SCHEDULED TOUR NOT TO EXCEED 19 HOURS PER WEEK. SUBJECT WILL BE WORKING MONDAY THROUGH FRIDAY, FROM 1400 TO 1700.											
31 50 SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 28	20. EMPLOYEE CODE 26	21. OFFICE CODING 49150		22. STATION CODE 75013	23. INTEGEE CODE 1	24. MIGRANTS CODE NO. DA. YR 03 16 64	25. DATE OF BIRTH MO. DA. YR 03 16 64	26. DATE OF GRADE MO. DA. YR 03 16 64	27. DATE OF LEI MO. DA. YR 03 16 64		
28. OIE EXPIRES NO. DA. YR 		29. SPECIAL REFERENCE CODE 1 - CSC 2 - RICA 3 - NONE	30. RETIREMENT DATA CODE 1 - CSC 2 - RICA 3 - NONE		31. SEPARATION DATA CODE TYPE 1 - YES	32. CORRECTION/CANCELLATION DATA CODE 1 - YES		33. SECURITY REF ID 	34. SEX 		
35. VET. PREFERENCE CODE 0 - NONE 1 - DPT 2 - 10 PT		36. SERV. COMP. DATE NO. DA. YR 	37. LONG. COMP. DATE NO. DA. YR 	38. CAREER CATEGORY CODE PRIVY TEMP	39. FEGLI / HEALTH INSURANCE CODE 0 - YES	40. SOCIAL SECURITY NO 					
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 3 yrs 3 - BREAK IN SERVICE MORE THAN 3 yrs			42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE FORMER EXECUTED 0 - YES 1 - NO	44. STATE TAX DATA CODE NO TAX EXEMPTIONS 0 - YES 1 - NO	45. STATE TAX DATA CODE NO TAX EXEMPTIONS 0 - YES 1 - NO					
SIGNATURE OR OTHER AUTHENTICATION POSTED  2/05/65 WK											

1130 Use Previous Edition

SECRET

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I certify this document  
was filled out  
by me personally.1130  
I certify this document  
was filled out  
by me personally.

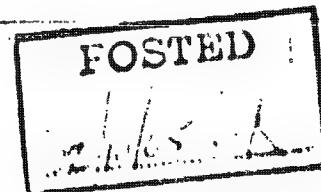
DLB: S FEB 65

**SECRET**  
(When Filled In)

## **NOTIFICATION OF PERSONNEL ACTION**

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)						
036130	FLORES DANIEL						
3. NATURE OF PERSONNEL ACTION PAY ADJUSTMENT TO PART TIME FROM FULL TIME (CORRECTION)							
4. EFFECTIVE DATE MO DA YY 02 08 65							
5. CATEGORY OF EMPLOYMENT PART TIME							
6. FUNDS ➡ X V TO V V TO CF CF TO V CF TO CF		7. COST CENTER NO CHARGEABLE 5235 1162 0000					
8. USC OR OTHER LEGAL AUTHORITY 50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS  DDP/SAS COUNTER-INTELLIGENCE STAFF OPERATIONS SECTION							
10. LOCATION OF OFFICIAL STATION  WASH., D. C.							
11. POSITION TITLE  INTELLIGENCE ASST							
12. POSITION NUMBER 1130							
13. SERVICE DESIGNATION D							
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0301.28					
		16. GRADE AND STEP 05 2					
		17. SALARY OR RATE 5165					
18. REMARKS THIS ACTION CORRECTS FORM 1150 EFFECTIVE DATE 02/08/65 AS FOLLOWS: ITEM #19, ACTION CODE, WHICH READ 28, TO READ 31. ITEM #20, EMPLOYEE CODE, WHICH READ 36, TO READ 20.							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 31	20. Employee Code 20	21. OFFICE CODES 49150	22. STATION CODE SAS	23. INTL6844 75013	24. BIRTH 00 00 00	25. DATE OF BIRTH 00 00 00	26. DATE OF GRADE 03 16 64
27. RIF EXPIRED NO DE 00		28. SPECIAL REFERENCES REFERRER	29. RETIREMENT DATA L 000 E 000 R 000	30. SEPARATION DATA DATA CODE 0000	31. REDUCTION/CANCELLATION DATA TYPE 00 00 00		32. SECURITY 000 00
33. VET PREFERENCE CODE		34. SICK COMP. DATE 00 00 00	35. LOSS COMP. DATE 00 00 00	36. CARRYOVER CATEGORY 0000	37. FEES / REIMBURSEMENTS 00 00 00	38. SERIAL NUMBER 00000000	
39. PREVIOUS GOVERNMENT SERVICE DATA CODE		40. LEAVE EFT 0000	41. FEDERAL TAX DATA 0000	42. STATE TAX DATA 0000	43. LOCAL TAX DATA 0000	44. OTHER AUTHENTICATION 0000	
45. SIGNATURE OR OTHER AUTHENTICATION FLORES DANIEL							



BRASILIANA DA CIRCUITOS AUTOMOTIVOS

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1989

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ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL INTELLIGENCE DATED 8 OCTOBER 1962.

**SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE  
AND STEP AS INDICATED IN CHART BELOW.**

**GENERAL SCHEDULE RATES**  
**Federal Employees Salary Act of 1964**

MHC: 6 AUG 64

SECRET  
(When Filled In)

CCF		NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)														
036130	FLORES DANIEL														
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT											
REASSIGNMENT		08 06 64		REGULAR											
6. FUNDS	X	V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY									
		CP TO V	CF TO CP	5235 1162 0000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION											
DDP/SAS COUNTER-INTELL STAFF OPERATIONS SECTION				WASH., D.C.											
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION									
INTELLIGENCE ASST				1130		D									
14. CLASSIFICATION SCHEDULE (GS, LS, OM)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE								
GS			0301.28		05 2		4850								
18. REMARKS															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE	20. EMPLOYEE CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. GRADE CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES	28. SECURITY REG. NO.	29. SECURITY REG. NO.	30. SECURITY REG. NO.	31. SECURITY REG. NO.	32. SECURITY REG. NO.		
37	10	49150 SAS	75013	1											
33. RIF EXPIRES		34. SPECIAL REFERENCE	35. RETIREMENT DATA	36. SEPARATION DATA CODE	37. CORRECTION/CANCELLATION DATA	38. SECURITY REG. NO.	39. SECURITY REG. NO.	40. SECURITY REG. NO.	41. SECURITY REG. NO.	42. SECURITY REG. NO.	43. SECURITY REG. NO.	44. SECURITY REG. NO.	45. SECURITY REG. NO.		
00 00 70		1 CSC 2 CICA 3 NCRA	400 00 70	1 CSC 2 CICA 3 NCRA	TYPE NO 00 00 70 EOD DATA	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000		
46. DEF. PREFERENCE		47. SERV. COMP. DATE	48. LONG. COMP. DATE	49. CAREER CATEGORY	50. DISABILITY/HEALTH INSURANCE	51. SOCIAL SECURITY NO.	52. SOCIAL SECURITY NO.	53. SOCIAL SECURITY NO.	54. SOCIAL SECURITY NO.	55. SOCIAL SECURITY NO.	56. SOCIAL SECURITY NO.	57. SOCIAL SECURITY NO.	58. SOCIAL SECURITY NO.		
0 NO 1 YES 2 NOT PT		00 00 70	00 00 70	1 CSC 2 CICA 3 NCRA	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000	0000 0 0000 0000		
60. PREVIOUS GOVERNMENT SERVICE DATA		61. LEAVE CAT	62. FEDERAL TAX DATA	63. STATE TAX DATA	64. FEDERAL TAX DATA	65. STATE TAX DATA	66. FEDERAL TAX DATA	67. STATE TAX DATA	68. FEDERAL TAX DATA	69. STATE TAX DATA	70. FEDERAL TAX DATA	71. STATE TAX DATA	72. FEDERAL TAX DATA		
CODES 0 NO PREVIOUS SERVICE 1 NO SERVICE IN GOVERNMENT 2 SERVICE IN GOVERNMENT FROM 1955 3 SERVICE IN GOVERNMENT FROM 1960		CODE	0000 0 0000 0000 0 00 0 00												
59. SIGNATURE OR OTHER AUTHENTICATION															
10-130 00 00 70		User Previous Edition		60-64 00 00 70		SECRET 6 AUG 64		65-69 00 00 70		70-74 00 00 70		75-79 00 00 70		80-84 00 00 70	
60. FEDERAL TAX DATA 61. STATE TAX DATA 62. FEDERAL TAX DATA 63. STATE TAX DATA 64. FEDERAL TAX DATA 65. STATE TAX DATA 66. FEDERAL TAX DATA 67. STATE TAX DATA 68. FEDERAL TAX DATA 69. STATE TAX DATA 70. FEDERAL TAX DATA 71. STATE TAX DATA 72. FEDERAL TAX DATA															



(When Filled In)

SECRET  
(When Filled In)

## NOTIFICATION OF PERSONNEL ACTION

ADPD 07/01/64

1 SERIAL NUMBER <b>036130</b>	2 NAME (LAST FIRST MIDDLE) <b>FLORBS DANIEL</b>			
3 NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>		4 EFFECTIVE DATE <b>06 19 64</b>	5 CATEGORY OF EMPLOYMENT	
6 FUNDS →	V TO V O TO V	V TO O O TO O	7 COST CENTER NO CHARGEABLE <b>4232 1000 1000</b>	8 CIV OR OTHER LEGAL AUTHORITY
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/SAS INTELL ST OPS SUP SEC</b>		10 LOCATION OF OFFICIAL STATION <b>WASH., D. C.</b>		
11 POSITION TITLE <b>TRANSLATOR</b>		12 POSITION NUMBER <b>0922</b>	13 CARRIER SERVICE DESIGNATION <b>D</b>	
14 CLASSIFICATION SCHEDULE (GS, GS-etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>1045,01</b>	16 GRADE AND STEP <b>05</b>	17 SALARY OR RATE
18 REMARKS				
SIGNATURE OR OTHER AUTHENTICATION				
<i>[Signature]</i> 7/1/64 Lass				

1. Serial No.	2. Name			3. Cost Center Number	4. LWOP Hours					
036130	FLORES DANIEL			49 350	38F 52 1000					
5. OLD SALARY RATE			6. NEW SALARY RATE			7. TYPE ACTION				
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS 04	2 3	4,355	03/17/63	GS 04	3 3	4,495	03/15/64			
8. Remarks and Authorization										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>JK</i> AUDITED BY <i>JK</i> I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. <i>JK</i> <i>SJL</i> SIGNATURES <i>JK</i> <i>SJL</i> <i>JK</i> <i>SJL</i> <i>JK</i> <i>SJL</i> <i>JK</i> <i>SJL</i> DATE <i>31 Jan 1964</i> PAY CHANGE NOTIFICATION										

FORM 9-61 360 Obsolete Previous Edition (4-51)

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Employee Code	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF RETIREMENT	28. SECURITY REQ. NO.	29. SE	
22	10	49350 SAS	75013	1	MO DA YR	MO DA YR	MO DA YR	MO DA YR	30. SEC		
30. HIRE EXPIRES		31. SPECIAL REFERENCE	32. RETIREMENT DATA	33. SEPARATION DATA	34. CORRECTION/CANCELLATION DATA	35. ZOD DATA	36. ZOD DATA	37. ZOD DATA	38. ZOD DATA	39. ZOD DATA	
MM DA YY											
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA							
CODE	0. NO PREVIOUS SERVICE 1. ONE 2. TWO 3. THREE 4. FOUR 5. FIVE 6. SIX 7. SEVEN 8. EIGHT 9. NINE 10. TEN	NO DA YR	NO DA YR	NO DA YR	NO DA YR	NO DA YR	NO DA YR	NO DA YR	NO DA YR	NO DA YR	
SIGNATURE OR OTHER AUTHENTICATION											
<b>POSTED</b>											

FORM 11-62 1150

Obsolete Previous Edition

SECRET 13-1000-131

 LEAD  
 Standard Job Order  
 Standard Job  
 Standard Job  
 Standard Job  
 Standard Job

13-1000-131

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCP  
MEMORANDUM DATED 1 AUGUST 1966, SALARY IS ADJUSTED AS FOLLOWS:  
EFFECTIVE 9 JANUARY 1966.

NAME	SERIAL	OPR&H FUNDS	GR-ST	OLD SALARY	NEW SALARY
FLORES DANIEL	036130	49 350	V 05 04 2	\$ 4,250	\$ 4,345

SECRET  
(When Filled In)

RZP: 9 MAY 63

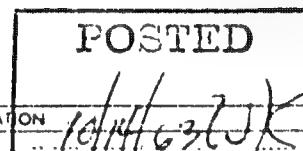
F-12

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
036130		FLORES DANIEL									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				05 09 63		REGULAR					
6. PUNISHMENT		X	V TO V	V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
			CF TO V	CF TO C		3232 1000 1000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP/SPECIAL AFFAIRS STAFF RESEARCH BRANCH REPORTS, RECORDS, TRANSLATION SEC				WASH., D.C.							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION					
TRANSLATOR				0702		D					
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0031.01		G4 2		4250					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION	20. Employee Code	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. Grade Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES			
37	10	51350 SAS	75013								
28. DTS EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA (CODE)	32. CORRECTION/CANCELLATION DATA					33. SECURITY REG. NO.	34. SES	
06 06 63											
35. VET PREFERENCE	36. MARRIAGE DATE	37. ACRES TSPN DATE	38. CAREER CATEGORY	39. MEDICAL / HEALTH INSURANCE	40. SOCIAL SECURITY NO						
CODE	00 00 00	00 00 00	00 00 00	00 00 00	00 00 00						
41. PENTAGON GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA								
L6-0	00 00 00 00	00 00 00 00	00 00 00 00								
45. SIGNATURE OR OTHER AUTHENTICATION	POSTED										
	12 May 63 J.D.										

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

AMOD 07/31/63

1 SERIAL NUMBER	2 NAME (LAST FIRST MIDDLE)		
036130	FLURES DANIEL		
3 NATURE OF PERSONNEL ACTION			
REASSIGNMENT			
4 FUNDING	X	V TO V	V TO CP
		CP TO V	CP TO CP
9 ORGANIZATIONAL DESIGNATIONS			
DDP/SAS			
11 POSITION TITLE			
TRANSLATOR			
14 CLASSIFICATION SCHEDULE (GS 1B, etc.)		15 OCCUPATIONAL SERIES	
GS		1045:01	
16 GRADE AND STEP			
04			
17 SALARY OR RATE			
18 REMARKS			
POSTED 			
SIGNATURE OR OTHER AUTHENTICATION			

Form 1150F  
163

Use Previous  
Edition

SECRET  
Q 1968

163-1  
LAW AND ORDER  
ARMED FORCES  
PROTECTION  
DEPARTMENT OF DEFENSE

(When Filled In)

22 + 1200

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 97-793 AND  
DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.  
EFFECTIVE 14 OCTOBER 1962

EFFECTIVE 14 OCTOBER 1960

卷之三

FLORES DANIEL 726130 39400 V 641 S 4040 041 34110

FLORES DANIEL 736130 34467

BWS: 13 MARCH 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
OAF												
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)											
036130	FLORES DANIEL											
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT (CAREER PROVISIONAL)						4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT					
						MO DA YR	REGULAR?					
						03 11 62						
6. FUNDS		X	V TO V	V TO CF		7. COST CENTER NO. CHARGEABLE	8. CSC OR OTHER LEGAL AUTHORITY					
			CF TO V	CF TO CF		2226 1200 1000	50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS  DDP OPSER R I DIV REFERENCE BRANCH INDEX SECTION - NIGHT SHIFT						10. LOCATION OF OFFICIAL STATION  WASH., D. C.						
11. POSITION TITLE  FILE CLERK						12. POSITION NUMBER  0147	13. CAREER SERVICE DESIGNATION  D					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)  GS			15. OCCUPATIONAL SERIES  0305.01			16. GRADE AND STEP  04 1	17. SALARY OR RATE  4040					
18. REMARKS SUBJECT TO THE SATISFACTORY COMPLETION OF A TRIAL PERIOD OF ONE YEAR. SUBJECT TO THE SATISFACTORY COMPLETION OF A MEDICAL EXAMINATION.												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOYEES CODE	21. OFFICE CODING NUMERIC		22. STATION CODE	23. INTEGEE CODE	24. MOLETS. CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR			
11	10	39400 RI		75013	1		03 11 62	03 11 62	03 11 62			
28. HIRE EXPIRES MO DA YR		29. SPECIAL REFERENCE	30. RETIREMENT DATA CODE		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA TYPE		33. SECURITY REG. NO.	34. SEX			
			1. CSC	2. RIFA	3. NONE		MO DA YR	C71CO	M1			
35. VET PREFERENCE		36. SERV COMP DATE MO DA YR		37. LONG COMP DATE MO DA YR		38. MIL. SERV CREDIT/LCB CODE	39. FEGL / HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO CODE				
0		03 11 58 03		11 62		P	1	460486230				
41. PREVIOUS GOVERNMENT SERVICE DATA						42. LEAVE CAT. CODE	FEDERAL TAX DATA			44. STATE TAX DATA		
							1. EXECUTED	2. TAX EXEMPTIONS	3. FORM EXECUTED	4. CSC	5. NC TAX	STATE CODE
							1. YES	2. NO	1. YES	1. YES	2. NO	
							2. NO	1. YES	2. NO	1. YES	2. NO	
						6		1	0	1	0	08
SIGNATURE OR OTHER AUTHENTICATION												

## CLASSIFICATION

## FITNESS REPORT

GENERAL INFORMATION							
1. EMPLOYEE NUMBER	2. NAME (Last, first, middle)		3. DATE OF HIRE	4. SIR	5. GRADE	6. SD	
	Flores, Daniel			M	GS 13	DQG	
7. OFFICIAL POSITION TITLE	8. OFFICERING OR ASSESSMENT		9. RANK STATUS	10. CODE / CA	11. MOX	12. OF	
Ops Officer	DDO/LA						
11. TYPE OF APPOINTMENT			12. TYPE OF REPORT				
X CAREER	RESERVE	TEMPORARY	INITIAL X ANNUAL	REASSIGNMENT	SPECIAL		
CONTRACT	SPECIAL	OTHER	13. REPORTING PERIOD (ROW 11)	14. DATE REPORT DUE IN O.P.			
			10 Oct 78 - 30 Sep 79				
SECTION B QUALIFICATIONS UPDATE							
IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.							
SECTION C PERFORMANCE EVALUATION							
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 SEE ATTACHED [REDACTED] TELEPOUCH 51744 (in 3383966) dtd 13 Nov 79.							RATING LETTER
SPECIFIC DUTY NO. 2							RATING LETTER
SPECIFIC DUTY NO. 3							RATING LETTER
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits and past record of promotion or retention. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the categories which most closely reflect his level of performance.							
45 CLASSIFICATION							RATING LETTER

## CLASSIFICATION

## SECTION D

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

NOV 15 1979  
HAIL ROCH

SEE ATTACHED.

## SECTION E

## CERTIFICATION AND COMMENTS

## 1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE  
13 Nov 79OFFICIAL TITLE OF SUPERVISOR  
DCOSTYPED OR PRINTED NAME AND SIGNATURE  
Robert Berg. /S/

## 2. BY EMPLOYEE

I HAVE  OR HAVE NOT  ATTACHED A  
STATEMENT CONCERNING THE SUPERVISOR'S  
EVALUATION OF MY PERFORMANCE.DATE  
13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

## 3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

13 Nov 79

COS

/S/

## 4. BY EMPLOYEE

I CERTIFY THAT I HAVE READ THE COMMENTS OF THE REVIEWING OFFICIAL  
ON THIS REPORT, AND HAVE HAD AN OPPORTUNITY TO MAKE ADDITIONAL  
STATEMENT IF I DESIRE. THE REVIEWING OFFICIAL'S COMMENTS ARE  
ACCURATE AND CORRECT.  
DANIEL FLORESDATE  
13 Nov 79

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

CLASSIFICATION

120/ \*EYES ONLY\*

CONFIDENTIAL

FRPI

# EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-5 (653) INFO: RF, FILE, (7/h)

79 3383966

PAGE 001  
TOR: 132307Z NOV 79

3383966

CONFIDENTIAL 132241Z NOV 79 DEFERRED TELEPOUCH

CITE [REDACTED]

TO: WASHINGTON.

FOR: C/LA/PERS

SUBJECT: ADMIN/RYBAT/PERS/FR FOR [REDACTED]

*Daniel Flores*

1. GIVEN BELOW IS THE FITNESS REPORT FOR [REDACTED] FOR THE PERIOD 1 OCT 78 TO 30 SEP 79. RATINGS ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD N. CHAIDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY RONALD F. BRIERLEY, COS. THE REPORT HAS BEEN REVIEWED AND CERTIFIED BY SUBJECT. SIGNED COPY OF FORM 45A BEING POUCHED.

2. THE FOLLOWING INFO IS KEYED TO FORM 45N, SECTION A:  
1. 03A130; 4. M; 5. GS-13; 6. DOG; 9. [REDACTED] 10. CAREER;  
11. ANNUAL; 12. 1 OCT 78 TO 30 SEP 79.

3. SECTION B. PERFORMANCE EVALUATION - SPECIFIC DUTIES:  
1. DIRECTS THE ACTIVITIES OF AN [REDACTED] MAN CI [REDACTED] TEAM RESPONSIBLE TO THE STATION. RATING LETTER - S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST [REDACTED] AND [REDACTED] IN [REDACTED]. RATING LETTER - S.

3. CASE OFFICER FOR AGENTS AND OPERATIONS DIRECTED AGAINST THE [REDACTED] TARGET. RATING LETTER - S.

4. SUPPORTS STATION OPERATIONS AND ACTIVITIES DIRECTED AGAINST THE [REDACTED] AND OTHER TARGETS.

5. CASE OFFICER FOR [REDACTED]. RATING LETTER - S.

OVERALL RATING = STRONG.

0-63 2 [REDACTED] CONFIDENTIAL

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CONFIDENTIAL

DEFERRED TELEPOUCH

79 3383966

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TOR: 132307Z NOV 79

3383966

4. SECTION C - NARRATIVE COMMENTS.

SHORTLY BEFORE THE DEPARTURE OF THE FORMER COS, HE SUBMITTED A SPECIAL MEMORANDUM ON SUBJECT'S PERFORMANCE WHICH CONCENTRATED MOSTLY ON SUBJECT'S RESPONSIBILITIES IN THE CI FIELD. A COPY OF THIS MEMORANDUM IS AVAILABLE IN SUBJECT'S PERSONNEL FILE. THE UNDERSIGNED FULLY ENDORSES THE LAUDATORY COMMENTS IN THAT MEMORANDUM, BUT SINCE SUBJECT HAS TAKEN ON BROADER RESPONSIBILITIES, IT IS NECESSARY TO COMMENT ON OTHER ASPECTS OF HIS WORK.

FOR THE PAST MONTHS, SUBJECT HAS BEEN DIVIDING HIS TIME ABOUT EQUALLY BETWEEN HIS CI RESPONSIBILITIES AND OTHER STATION OBJECTIVES, PRINCIPALLY THE [ ] TARGET. SUBJECT WAS GIVEN THESE ADDITIONAL DUTIES BECAUSE THE CI OPERATIONS GROUP IS WELL ORGANIZED AND REQUIRES LESS DIRECT C/O INPUT, AND ALSO BECAUSE OF THE NEED TO DEDICATE ALL AVAILABLE RESOURCES AGAINST THE [ ] TARGET. THIS STATION IS [ ] OF [ ] WITHIN THE DIRECTORATE WHICH HAVE BEEN SELECTED FOR A CONCENTRATED EFFORT AGAINST [ ] AND THIS TARGET NOW RANKS NUMBER ONE AMONG THE STATION'S MANY PRIORITY OBJECTIVES. SUBJECT'S PAST EXPERIENCE IN [ ] OPERATIONS, HIS ABILITY TO [ ] AS A [ ] IN THIS COUNTRY, AND HIS OTHER STRENGTHS, WERE THE INGREDIENTS WHICH THE STATION NEEDED TO EXPLOIT IN THIS EFFORT.

SUBJECT HAS TAKEN OVER THE PRINCIPAL STATION OPERATION DIRECTED AGAINST [ ]. THIS WAS A FAIRLY NEW OPERATION AT THE TIME IT WAS ASSIGNED TO SUBJECT AND IT WILL MATURE UNDER HIS DIRECTION. FOR REASONS OF SENSITIVITY, A MORE DETAILED REVIEW OF SUBJECT'S WORK ON THIS OPERATION CANNOT BE PROVIDED, BUT THE RECORD SHOULD NOTE THAT DURING THE PAST THREE MONTHS, HE HAS HANDLED THIS OPERATION IN A THOROUGHLY PROFESSIONAL MANNER WITH STEADY PROGRESS BEING MADE TO FULLY EXPLOIT THE OPERATIONAL AND REPORTING POTENTIAL. ALSO DURING THIS REPORTING PERIOD, SUBJECT RENEWED CONTACT THROUGH HIS OWN EFFORTS WITH A FORMER REPORTING ASSET WHO HAD DRIFTED AWAY FROM COLLABORATION WITH THE ORGANIZATION. SUBJECT IS NOW ATTEMPTING TO BREATH NEW LIFE INTO THIS OPERATION AND BRING IT BACK UNDER CONTROL.

SUBJECT ALSO COOPERATED WITH ANOTHER GOVERNMENT AGENCY IN ATTEMPTING TO RE-ESTABLISH CONTACT WITH A [ ]

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DEFERRED TELEPOUCH

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TUR: 132307Z NOV 79

3383966

[REDACTED] DURING THE TARGET'S VISIT TO THE [REDACTED] AREA. SUBJECT WAS IN CHARGE OF COORDINATING THIS OPERATION WITH [REDACTED] AND WITH THE OTHER AGENCY. THE OPERATION WAS SUCCESSFUL FROM THE POINT OF VIEW OF ARRANGING A MEETING WITH THE TARGET, BUT SINCE THE TARGET'S RETURN TO THE [REDACTED] HE HAS REFUSED EFFORTS BY SUBJECT TO CONTINUE CONTACT.

ANOTHER EFFORT AGAINST THE [REDACTED] TARGET UNDER SUBJECT'S RESPONSIBILITY INVOLVES THE RESOURCES OF THE SPECIAL CI OPERATIONS GROUP. FOR SOME MONTHS NOW, THIS GROUP HAS BEEN TRYING TO MOUNT A [REDACTED] AND PROSPECTS REMAIN ENCOURAGING THAT THIS EFFORT WILL SOON BE OPERATIONAL. THIS IS A FAIRLY COMPLEX UNDERTAKING WHICH REQUIRES PATIENCE AND AN ELEMENT OF GOOD LUCK IN ORDER TO BE SUCCESSFUL. SUBJECT DESERVES CONSIDERABLE CREDIT FOR THE PROGRESS MADE THUS FAR AND IF EVERYTHING GOES ACCORDING TO PLAN, THIS OPERATION SHOULD BE PRODUCING WITHIN A SHORT PERIOD OF TIME.

APART FROM HIS WORK AGAINST THE [REDACTED] TARGET, SUBJECT WAS SUCCESSFUL IN [REDACTED] AND LATER WAS ABLE TO [REDACTED] WITH THE [REDACTED] HIMSELF. FOLLOWING UP ON A LEAD FROM ANOTHER SOURCE THAT A [REDACTED] SUBJECT USED HIS NATIVE LANGUAGE AND [REDACTED] AND [REDACTED] UNDER THE GUISE OF BEING A [REDACTED] WHO WANTED TO MONITOR THE [REDACTED] ASSESSMENT INFORMATION OBTAINED FROM THE [REDACTED] GREATLY FACILITATED THE ABILITY OF SUBJECT TO [REDACTED] ONCE CONTACT WAS MADE. SUBJECT WAS ABLE TO DISCERN THAT THE TARGET WAS POTENTIALLY VULNERABLE ON [REDACTED] BUT TIME DID NOT PERMIT THIS VULNERABILITY FROM BEING EXPLOITED BEFORE THE TARGET COMPLETED HIS TOUR AND DEPARTED THE COUNTRY. STATION REGRETS THAT A LEAD TO THIS TARGET HAS NOT IDENTIFIED EARLIER, BUT THIS DOES NOT DETRACT FROM THE PROFESSIONAL MANNER IN WHICH SUBJECT EXPLOITED EVERY OPPORTUNITY TO PUSH THIS CASE FORWARD AGAINST AN UNREALISTIC DEADLINE.

THIS REPORTING PERIOD HAS AGAIN BEEN ONE OF CONSIDERABLE ACTIVITY ON THE PART OF SUBJECT IN WHICH HE HAS DEMONSTRATED HIS TAINT FOR OPERATIONS AND PARTICULARLY HIS ABILITY TO

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DEFERRED TELEPOUCH

79 3383966

PAGE 004  
TO: 132307Z NOV 79

3383966  
[REDACTED]

DEVELOP AND HANDLE AGENTS. HE HAS DISPLAYED VERSATILITY AND FLEXIBILITY IN PURSUING HIS TARGETS AND IS EVER ALERT FOR VULNERABILITIES WHICH CAN BE EXPLOITED. HE USES GOOD JUDGMENT IN HANDLING HIS CASES AND HIS TRADECRAFT PROCEDURES DURING THIS PERIOD HAVE BEEN SOUND. IT SHOULD ALSO BE NOTED THAT THE PARTICIPATING [REDACTED] CASES WHICH HE IS INVOLVED ARE NOT EASY ONES. THEY REQUIRE HARD WORK, AND THE FULL RANGE OF CASE OFFICER EXPERIENCE IN ORDER TO PUSH THEM FORWARD. HIS RESPONSIBILITIES IN THE CI FIELD ARE EQUALLY DEMANDING. SUBJECT HAS MADE A VERY POSITIVE CONTRIBUTION TO THE WORK OF THIS STATION DURING THIS REPORTING PERIOD AND WELL DESERVES A RATING OF STRONG FOR HIS VARIOUS DUTIES AND A STRONG FOR HIS OVERALL PERFORMANCE.

5. COMMENTS BY REVIEWING OFFICER:

I CONCUR WITH THIS EVALUATION AND BELIEVE IT IS MOST COMPREHENSIVE AND OBJECTIVE. HAVING WORKED WITH SUBJECT DURING AN EARLIER PERIOD OF HIS CAREER WHEN HE WAS THEN A GOOD OFFICER (1970-72), I AM STRUCK BY THE REMARKABLE PROGRESS HE HAS MADE IN THREE KEY AREAS: OPERATIONAL THINKING AND ANALYSIS, WRITING, AND SOUND, PROFESSIONAL APPLICATION OF BASIC OPERATIONAL PRINCIPLES.

I AM DELIGHTED THIS HIGHLY CAPABLE, AGGRESSIVE OFFICER WILL BE REMAINING A THIRD YEAR AT THIS STATION AND LOOK FORWARD TO A MAJOR CONTRIBUTION FROM HIM IN MOST OPERATIONAL AREAS OF PRIORITY CONCERN. RVN 13 NOV 99 DRV D9C.3.

END OF MESSAGE

CONFIDENTIAL

## CONFIDENTIAL

FITNESS REPORT			NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.					
<b>SECTION A</b>			<b>GENERAL INFORMATION</b>					
1. EMPLOYEE NUMBER 036130	2. NAME (last, first, middle) Flores, Daniel			3. DATE OF BIRTH	4. SEX	5. GRADE	6. SD	
7. OFFICIAL POSITION TITLE Ops Officer			8. OFF/DIV/BR OF ASSIGNMENT DDO/LA/COG		9. CURRENT STATION Hqs			
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT					
X CAREER CONTRACT	CAREER PROVISIONAL SPECIAL	RESERVE TEMPORARY	X ANNUAL	21-MONTH	30-MONTH	REASSIGNMENT	SPECIAL	
			12. REPORTING PERIOD (From-to) 1 Dec 76 - 30 Sep 77		13. DATE REPORT DUE IN O.P. 31 October 77			
<b>SECTION B</b>			<b>PERFORMANCE EVALUATION</b>					
<u>U</u> - <u>Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.							
<u>M</u> - <u>Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.							
<u>P</u> - <u>Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.							
<u>S</u> - <u>Strong</u>	Performance is characterized by exceptional proficiency.							
<u>O</u> - <u>Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.							
<b>SPECIFIC DUTIES</b>								
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).								
SPECIFIC DUTY NO. 1 Supervise the LA/COG/□ and □ section which includes □ operations officers, □ intelligence analyst, and a secretary.							RATING LETTER S	
SPECIFIC DUTY NO. 2 As section chief, provide operational guidance and support to the field stations' efforts to develop and recruit Cubans in that area.							RATING LETTER S	
SPECIFIC DUTY NO. 3 Assume direct case officer responsibility for sensitive □ reporting sources, including TDU travel for debriefing purposes when the assets are available; developing leads for potential recruitment efforts against new targets.							RATING LETTER S	
SPECIFIC DUTY NO. 4 Coordinate with other area division desks and components to provide maximum support to Cuban operational activities in their respective field stations.							RATING LETTER S	
SPECIFIC DUTY NO. 5							RATING LETTER	
SPECIFIC DUTY NO. 6							RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>								
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.								
RATING LETTER S							S 2. IMPDET CL BY 007622	

## CONFIDENTIAL

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position, bearing in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B, to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, supplies, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Flores came to the Cuba Operations Group from a brief assignment to the Office of Training. Prior to the OTR interim, Mr. Flores had been a COG case officer and was therefore familiar with its operational techniques. During this ten-month period under review, Mr. Flores served as a section chief with responsibilities for [redacted] stations with a [redacted] target [redacted] and [redacted] and [redacted]. Mr. Flores was the only GS-13 officer to hold section chief responsibility, yet his performance compared favorably with that of the GS-14 section chiefs. As a section chief, Mr. Flores was supervisor for [redacted] operations officers, [redacted] intelligence analyst and a secretary. He was responsible for ensuring the prompt handling of correspondence to and from the field stations, and providing operational guidance and direction on matters pertaining to Cuban operations. His section was managed in a competent manner with Mr. Flores demonstrating his ability to delegate functional responsibilities.

The Cuba Operations Group also functions in a direct case officer capacity, and Mr. Flores frequently traveled TDY to handle cases. He was the operations officer for one particularly sensitive and productive [redacted] reporting case. This required him to travel on short notice and to arrange for secure meeting and debriefing sessions of this reporting source.

Mr. Flores also traveled to [redacted] on various occasions to meet with [redacted] contacts and participate in developmental operations. One particular recruitment attempt required Mr. Flores to [redacted] the

--CONTINUED--

## SECTION D

## CERTIFICATION AND COMMENTS

## 1. BY SUPERVISOR

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Rating: S-1 / Profile:

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION
--

OFFICIAL TITLE OF SUPERVISOR
------------------------------

TYPE

DC/LA/COG

## 2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION  
OF MY PERFORMANCE

DATE

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

*4/24/77*

*Daniel Flores*

## 3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject likes to operate. He is very practical, experienced, and realistic. He is, however, a little quiet and tends to accept things the way they are. While I have no doubt as to his skills, he may need a bit more management experience to learn how to make things move despite obstacles. He has done a fine job running the [redacted] and [redacted] section of Cuba Operations Group.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

C/LA/COG

## 4. BY EMPLOYEE

I CERTIFY THAT I HAVE BEEN THE ENTRANCE IN  
ALL SECTIONS OF THIS REPORT

*4/24/77*

*Right to do business*

CONFIDENTIAL

C O N F I D E N T I A L

FITNESS REPORT

Daniel Flores

NARRATIVE COMMENTS

cont.

[redacted] and to devise a secure and timely method of approach to the individual Cuban.

In comparing Mr. Flores' performance as an operations officer and as a supervisor, I believe his performance is somewhat stronger in the former capacity. Mr. Flores has all the attributes of an excellent case officer: he is aggressive, thinks operationally, and is fast on his feet in an operational situation. He is further aided by his fluency in Spanish and has on more than one occasion successfully [redacted] During his TDY travels, he has repeatedly demonstrated dedication to the job at hand, willingness to work long hours, and a flexibility to handle all types of situations.

Mr. Flores is less enthusiastic when it comes to the paperwork and bureaucratic requirements of his position. While he is a good writer, he tends to handle his written tasks in a hurried manner and consequently, his work oftentimes requires review. He is also inclined to take the shorter and easier approach when handling the paper flow requirements. I mention these points not because they represent basic shortcomings, but simply to contrast them to his exceptionally high performance in his operations officer capacity.

In sum, Mr. Flores is an extremely experienced, competent and well motivated operations officer. His talent as a "street operator" with a keen sense for the human target has been amply demonstrated. He has now quite successfully been introduced to his first supervisory position and proven that he is competent for assignments of this nature. I believe Mr. Flores is capable of handling positions of increasing responsibility and should be given the opportunity to do so.

\* \* \*

:

C O N F I D E N T I A L

SECRET  
CLASSIFICATION

## FITNESS REPORT

## GENERAL INFORMATION

1. EMPLOYEE NUMBER <b>036130</b>	2. NAME (last, first, middle) <b>FLORES, Daniel</b>	3. DATE OF BIRTH <b>4-06-50</b>	4. SEX <b>M</b>	5. GRADE <b>12</b>
6. OFF/DIV/BR OF ASSIGNMENT <b>DDA/OTR/LTD</b>	7. CURRENT STATION <b>Bqs.</b>	8. CODE (A-AW)	X HOO	DP
9. TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> CONTRACT <input type="checkbox"/> OTHER/EMT		10. TEMPORARY	11. ANNUAL	12. TYPE OF REPORT <input checked="" type="checkbox"/> REASSIGNMENT <input type="checkbox"/> SPECIAL
13. REPORTING PERIOD (FROM-TO) <b>22 June - 19 November 1976</b>		14. DATE REPORT DUE IN O.P. <b>A/A</b>		

## SECTION B      QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

## SECTION C      PERFORMANCE EVALUATION

<u>U</u> -Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
<u>M</u> -Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
<u>P</u> -Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
<u>S</u> -Strong	Performance is characterized by exceptional proficiency.
<u>O</u> -Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

## SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1	Conducts tutorial training in clandestine operational tradecraft skills for [REDACTED] as well as U.S. staff and contract personnel.	RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2	In collaboration with sponsoring Agency components prepares detailed training programs and schedules for the conduct of tailored tutorial and small-group training.	RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 3	Evaluate trainee performance in each program and prepare final training reports, and as appropriate draft follow-up questionnaires for field evaluation of training effectiveness.	RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 4	Participate in live problems and exercises as [REDACTED] and [REDACTED] as required and contribute to improvement in training materials and techniques.	RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 5		RATING LETTER <b>C</b>
SPECIFIC DUTY NO. 6		RATING LETTER <b>C</b>

## OVERALL PERFORMANCE IN CURRENT POSITION

Please cite comments concerning about the employee's overall performance in this position, particular merit or contributions of employee, and/or potential for job enlargement, promotion, transfer, training and further promotion or retention. Please also cite examples of employee's overall performance during the rating period where the letter is the rating best corresponding to the employee's overall quality reflected by level of performance.

S E C R E T  
CLASSIFICATION

SECTION D

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated by current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or elaborate upon information given in narrative. Provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and how management handled use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

Mr. Flores joined [REDACTED] Unit in mid-June 1976 and after a week's familiarization with training materials, aids and office routine of the Unit, he attended a two-week Instructor Training Workshop at the [REDACTED]. On completion of the Workshop, Subject returned to the Unit for further familiarization with the routine of the Unit, assisted in several [REDACTED] problems, and monitored a two-week training program which included active participation as a trainee himself in the SAI (or persuasion skills) portion of the program. Subsequently Mr. Flores assisted as a [REDACTED] in a brief but significant program involving the training of a [REDACTED] assisting the Agency in [REDACTED]. Mr. Flores then assisted another instructor in devising and conducting the first program this Unit has undertaken designed to teach [REDACTED] to Staff Employees who are deemed likely to be [REDACTED] of [REDACTED] and [REDACTED]. Mr. Flores then planned for, and from 12 October through 19 November conducted a tutorial training program in clandestine operations tech-

(continued)

SECTION E

CERTIFICATION AND COMMENTS

1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

4 Months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

17 January 1977

Chief, ALT Unit

[Signature] Walter R. Cox

2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION  
OF MY PERFORMANCE

DATE

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

[Signature] 26 Jan. 77

[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur in the ratings on specific duties and on the overall rating of STRONG for Mr. Flores. Although he was assigned to this Unit for a short period of time, he was proving to be a well qualified operations instructor. His home Division requested his return in order to give him a responsible position for which he was well qualified, and he should do well on that assignment.

NOTE

19/1/77

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, CTR/ED

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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STATEMENT OF THE DATE ON WHICH THIS REPORT WAS PREPARED

DATE

DATE RECEIVED BY SUPERVISOR

STANDARD ATTACHED

STANDARD ATTACHED

S E C R E T

Continuation of Section D of Fitness Report on Daniel Flores,  
GS-12, for period 22 June - 19 November 1976 -----

niques for a [redacted] who is scheduled to serve as an [redacted]  
[redacted] in the [redacted]

The first independent training task given to Mr. Flores was of a [redacted] serving as an access agent, but this task was cancelled at the last minute when the concerned Base discovered grounds for field termination of the agent rather than providing tutorial training for the agent in the U.S. Mr. Flores was justifiably irritated at this turn of events which denied him what held promise for being a challenging initial training program.

It was with regret that we learned, early into what turned out to be Mr. Flores' only independent training program, that a priority requirement of his home-base Division would necessitate his return to Division duty soonest. The Division agreed to our request that Mr. Flores conclude the training program he had tailored, and begun, and Mr. Flores is to be commended for having done an exceptionally fine job in this assignment. The completion-of-training report was also well organized, and the questionnaire which asks for an evaluative follow-up from the trainee's field Station is to the point.

Early in his assignment Mr. Flores took over the maintenance and improvement of the Unit's operations training slides, consolidated them into an extremely functional package, and solicited ideas from other instructors to improve the package. Much to his credit and the Unit's benefit, Mr. Flores managed to persuade another Agency component to undertake--without charge--a major revamping of some of the slides using computer-designed art work to replace some of the less impressive early work in this field.

S E C R E T

## CLASSIFICATION

## FITNESS REPORT

## SECTION A

## GENERAL INFORMATION

036130

FLORES, Daniel

DATE OF BIRTH

SEX

GRADE

6/50

OFFICIAL POSITION/TITLE

Ops Officer

M

GS 13

DOD

DDO/LA

INSTRUCTIONS FOR ASSIGNMENT

CURRENT STATION

10100 CA 11

HRS.

Wk

## 11. TYPE OF APPOINTMENT

## 12. TYPE OF REPORT

<input checked="" type="checkbox"/>	CAREER	RESERVE	TEMPORARY	INITIAL	<input checked="" type="checkbox"/>	ANNUAL	REASSIGNMENT	SPECIAL
	CONTRACT	SPECIAL	OTHER	15 Feb - 30 Sept 78			14. DATE REPORT DUE IN O.P.	

## SECTION B

## QUALIFICATIONS UPDATE

If Qualifications Update Form is being submitted with changes, and is attached to this report, place the word "YES" in the box to the right. If no changes are required, place the word "NO" in the box at right.

## SECTION C

## PERFORMANCE EVALUATION

U-Unsatisfactory

Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

M-Marginal

Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P-Proficient

Performance is satisfactory. Desired results are being produced in the manner expected.

S-Strong

Performance is characterized by exceptional proficiency.

O-Outstanding

Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

## SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated, on their ability to supervise (indicate number of employees supervised).

## SPECIFIC DUTY NO. 1

SEE ATTACHED (IN 1584998) dtd 18 Nov 78

RATING LETTER

## SPECIFIC DUTY NO. 2

RATING LETTER

## SPECIFIC DUTY NO. 3

RATING LETTER

## SPECIFIC DUTY NO. 4

RATING LETTER

## SPECIFIC DUTY NO. 5

RATING LETTER

## SPECIFIC DUTY NO. 6

RATING LETTER

## OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular strengths or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most closely reflects his level of performance.

RATING LETTER

100% 45 100%

CLASSIFICATION

12 MAY 1978

RATING LETTER

## CLASSIFICATION

## NARRATIVE COMMENTS

## SECTION D

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

124 10 56 AM 78

SEE ATTACHED.

HAROLD ROUGH

## SECTION E

## CERTIFICATION AND COMMENTS

## 1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

Rating Officer Profile:

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE UO

18 Nov 78

DCOS

Robert Berg /S/

## 2. BY EMPLOYEE

I HAVE  OR HAVE NOT  ATTACHED A  
STATEMENT CONCERNING THE SUPERVISOR'S  
EVALUATION OF MY PERFORMANCE.

DATE

18 Nov 78

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

## 3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

SEE ATTACHED.

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE

18 Nov 78

COS

Lawrence Sternfield /S/

## 4. BY EMPLOYEE

I CERTIFY I HAVE SEEN THE ENTRIES IN ALL SECTIONS  
OF THIS REPORT. I HAVE  HAVE NOT  ATTACHED  
A STATEMENT CONCERNING THE REVIEWING OFFICIAL'S  
EVALUATION OF MY PERFORMANCE.

DATE

18 Nov 78

SIGNATURE OF EMPLOYEE

Daniel Flores /S/

CLASSIFICATION

104/EYES ONLY

CONFIDENTIAL

FHRP: [REDACTED]

EYES ONLY

DEFERRED TELEPOUCH

ACTION: C/LA-S-1503 INFO: HF, FILE, (7/A)

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TOK: 182031Z NOV 78

1584998

CONFIDENTIAL 172250Z NOV 78 DEFERRED TELEPOUCH

CITE [REDACTED]

*Per*

TO: WASHINGTON.

FOR: C/LA/PERS

*Dan Flores*

SUBJECT: ADMIN/RYAT/PERS/FITNESS REPORT FOR [REDACTED]

1. GIVEN HELPU IS THE FITNESS REPORT ON SUBJECT FOR THE PERIOD 15 FEB - 30 SEPT 78. RATTING ON SPECIFIC DUTIES AND NARRATIVE COMMENTS WERE PREPARED BY HAROLD O. CHAIDEZ, DCOS. REVIEWING COMMENTS WERE PREPARED BY JOEL N. NEBECKER, COS. SUBJECT WAS NOT SHOWN A COPY OF THIS REPORT AS HE DEPARTED STATION ON EMERGENCY LEAVE BEFORE THE REPORT COULD BE TYPED. A COPY WILL BE MADE AVAILABLE TO HIM IMMEDIATELY UPON HIS RETURN AND ANY STATEMENT BY THE EMPLOYEE WILL BE TELEPOUCHED TO HHS. A SIGNED COPY OF FORM 45A WILL BE POUCHEAD AT THAT TIME.

2. THE FOLLOWING INFO IS KEYED TO FORM 45A, SECTION A:  
1. 030130Z 4. MS 5. GS-13 6. DOGS 9. [REDACTED]  
10. CAREERS 11. ANNUAL 12. 15 FEB-30 SEP 78.

3. SECTION B. PERFORMANCE EVALUATION - SPECIFIC DUTIES:

1. DIRECTS THE ACTIVITIES OF AN [REDACTED] MAN CI [REDACTED] TEAM RESPONSIBLE TO THE STATION, AND WHICH INCLUDES COORDINATING ALL RTACTION OPS INITIATED BY THE TEAM. RATING LETTER -- S.

2. RESPONSIBLE FOR TARGETTING CI OPERATIONS AGAINST [REDACTED] AND [REDACTED] IN [REDACTED] RATING LETTER -- S.

3. CASE OFFICER FOR [REDACTED] RATING LETTER -- S.

4. COORDINATES SENSITIVE CE OPERATIONS RUN BY OTHER MILITARY AGENCIES WITH [REDACTED] RATING

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*SG*  
*SG*

CONFIDENTIAL

DEFERRED TELEPOUCH

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TOP: 182031Z NOV 78

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LETTER -- S.

5. CONDUCTS OTHER LIAISON RELATED CI ACTIVITY AND  
PREPARES NECESSARY MEMORANDA AND REPORTS. RTAING LETTER -- S.

OVERALL PERFORMANCE -- S.

4. SECTION C - NARRATIVE COMMENTS

THIS IS THE INITIAL REPORT WRITTEN ON SUBJECT AND  
COVERS A PERIOD OF SEVEN AND ONE-HALF MONTHS SINCE HIS ARRIVAL  
IN [REDACTED] IN FEB 78. SUBJECT HAS BEEN IN THE ORGANIZATION  
FOR OVER 16 YEARS AND SERVED TWO U/S ASSIGNMENTS PRIOR TO  
[REDACTED]

HIS PRIMARY DUTY IS TO SUPERVISE THE OPERATIONS OF  
A CI UNIT COMPOSED OF PERSONNEL [REDACTED] BUT  
WHICH IS UNDER THE OPERATIONAL DIRECTION OF THE STATION. THIS  
PARTICULAR UNIT REPRESENTS THE NUCLEUS OF THE STATION'S CI  
OPERATIONAL CAPABILITY. IT IS ALSO A STRONG CONTRIBUTOR TO  
STATION'S EFFORTS DIRECTED AGAINST THE HARD TARGETS IN THE  
FI FIELD. SUBJECT PARTICIPATES IN ALL LEVELS OF ACTIVITY  
WITH THIS UNIT FROM THAT OF A MANAGER TO SERVING AS AN  
OPERATIONS OFFICER. THE LEADERSHIP AND EXAMPLE WHICH HE  
SETS HAVE BEEN AN ESSENTIAL INGREDIENT IN THE SUCCESS  
ENJOYED BY THE UNIT IN RECENT MONTHS. IN APRIL 1978, THE  
STATION UNDERTOOK AN [REDACTED] DIRECTED AT THE [REDACTED]

[REDACTED] OF A [REDACTED]  
SUBJECT PARTICIPATED IN THE RECRUITMENT OF A [REDACTED]  
WHO PROVIDED ACCESS TO THE TARGET INSTALLATION AND WAS  
SUBSEQUENTLY INVOLVED IN ALL ASPECTS OF THE OPERATION  
EXCEPT THE ACTUAL [REDACTED] OF THE [REDACTED]  
THIS SUCCESSFUL OPERATION WAS FOLLOWED BY ANOTHER ONE THE  
FOLLOWING MONTH, THIS TIME DIRECTED AT THE [REDACTED] OF  
A [REDACTED] TWO VALUABLE REPORTS WERE  
PRODUCED FROM THIS OPERATION ON THE POLICIES AND PLANS OF

A [REDACTED] IN JULY, SUBJECT SUPERVISED THE  
RECRUITMENT OF AN AGENT WHO HAS ESTABLISHED ACCESS TO A  
[REDACTED] A TECHNICAL OPERATION IS NOW  
UNDERWAY TO [REDACTED]

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CONFIDENTIAL

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IN SEPTEMBER, ANOTHER OPERATION BEGAN AGAINST THE [REDACTED] OF THE SAME PRINCIPAL ADVERSARY MENTIONED ABOVE SINCE A [REDACTED] HAD BEEN ACQUIRED. AGAIN, SUBJECT PARTICIPATED IN THE RECRUITMENT OF THE [REDACTED] OF THE [REDACTED] AND IN OTHER PHASES OF THE OPERATION WHICH CONTINUE AT THIS TIME.

IN ADDITION TO THESE SPECIFIC OPERATIONS, THE CI UNIT ALSO CARRIES OUT A HOST OF [REDACTED] AND OTHER WORK AS REQUIRED IN THE CI FIELD. SINCE [REDACTED] SERVES AS PROBABLY THE PRINCIPAL BASE FOR OPERATIONS BY THE [REDACTED] AND THE [REDACTED] THE UNITED STATES, SELECTIVE TASKING MUST BE UNDERTAKEN TO OBTAIN MAXIMUM EFFICIENCY FROM THIS SMALL UNIT.

SUBJECT ALSO HANDLES [REDACTED] OF THE CI UNIT, AND IS ALSO RESPONSIBLE FOR PROVIDING SUPPORT THROUGH THIS UNIT TO OTHER CI ACTIVITIES DIRECTED AGAINST [REDACTED] AND [REDACTED] IN [REDACTED]

INDEED, THE FIRST PART OF HIS TOUR IN [REDACTED] HAS BEEN A BUSY ONE. THE STATION FINDS HIM TO BE AN ENERGETIC, VERSATILE, AND HIGHLY QUALIFIED OFFICER. HE HAS HANDLED THE PERSONNEL AND OPERATIONAL PROBLEMS WHICH HAVE SURFACED WITH HIS CI UNIT WITH TACT AND EFFICIENCY, AND HIS RAPPORT WITH HIS [REDACTED] IS VERY GOOD. DURING RECENT CONVERSATIONS, [REDACTED] HAVE EXPRESSED THEIR HIGH REGARD FOR SUBJECT'S ABILITIES.

HIS ABILITY TO [REDACTED] AS A [REDACTED] IS AN ADDED FACTOR IN HIS FAVOR AND PROVIDES HIM WITH A GREATER DIMENSION FOR OPERATIONS. THE STATION HAS USED SUBJECT ON OCCASION FOR [REDACTED] OPERATIONS, BUT THIS USE MUST BE SELECTIVE IN ORDER NOT TO ADVERSELY IMPINGE UPON HIS PRIMARY WORK WITH THE CI UNIT.

SUBJECT IS VERY COST CONSCIOUSNESS IN THE USE OF STATION FUNDS AND EXTRACTS A HEALTHY RETURN FOR PROJECT MONIES USED TO SUPPORT THE WORK OF THE CI UNIT.

SUBJECT WELL DESERVES A RATING OF STRONG FOR HIS

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OFFICE OF THE ATTORNEY GENERAL  
CONFIDENTIAL

11/24 [0557] 12

DEFERRED TELEPOUCH

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VARIOUS DUTIES AND AN OVERALL STRONG FOR THIS REPORTING PERIOD. WE LOOK FORWARD TO A CONTINUED HIGH LEVEL OF PERFORMANCE DURING THE YEAR TO COME.

5. SECTION D.1. SUBJECT HAS BEEN UNDER MY SUPERVISION FOR SEVERAL ONE-HALF MONTHS. D.3: COMMENTS BY REVIEWING OFFICIAL:

I FULLY CONCUR WITH THE NARRATIVE COMMENTS OF THE REVIEWER. SUBJECT HAS DISPLAYED A GREAT AMOUNT OF IMAGINATION AND ENERGY IN DIRECTING A DIFFICULT ACTIVITY NAMELY COUNTERINTELLIGENCE ACTIVITY THAT IS SEVERELY RESTRICTED BY ATTORNEY GENERAL GUIDELINES TO THE EXISTING EXECUTIVE ORDER. SUBJECT HAS DESPITE THIS BEEN ABLE TO KEEP A VERY POSITIVE THRUST TO HIS OPERATIONS AND HAS BEEN ABLE TO MOTIVATE THE AGENTS AND PERSONNEL UNDER HIS CONTROL. I AM TOTALLY SATISFIED WITH HIS ENERGY AND MOTIVATION. DESPITE THE FRUSTRATIONS INHERENT IN THE COUNTERINTELLIGENCE ACTIVITY HE CARRIES ON WITH A HIGH SPIRIT AND A TREMENDOUS AMOUNT OF GOOD WILL - NO MEAN ACHIEVEMENT AT THIS JUNCTURE OF AGENCY COUNTERINTELLIGENCE ACTIVITIES. E3, IMPDET.

END OF MESSAGE

CONFIDENTIAL

**SECRET  
CLASSIFICATION**

FITNESS REPORT

## OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, positive or negative traits or habits and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period place the letter to the right hand corresponding to the phenomena which most closely reflects his level of performance.

8-3900 43 883444

CLASSIFICATION  
SIGNAL

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SECRET  
CLASSIFICATION

## SECTION D

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C, to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

This officer has worked under my supervision for approximately six months. This is the first fitness report I have prepared on him. After two field tours and his current assignment to Cuba Operations Group, he has developed into a solid and professional operations officer with the skills we hope our employees will develop. He is now highly motivated and creative in his work. He has demonstrated, particularly in recent months, a gratifying degree of drive and interest.

He has handled one of our most productive and sensitive [ ] assets. With his guidance this agent has produced, within the past six months, some of the highest quality intelligence on [ ] and [ ] this Agency has obtained. Because this agent must be serviced via TDY travel, the responsible case officer must be able to work with very little guidance and have the tradecraft skills and reports writing ability to work largely on his own. With this case Mr. Flores has demonstrated himself to be a first-class agent handler, highly attuned to operational information and quality intelligence production.

As Section Chief I have relied upon him heavily to provide the institutional memory our work demands. He has full grasp of all operations directed against [ ] not only in those countries under his direct responsibility, but throughout Latin America. Since all of the officers in this section [ ] and agents, Mr. Flores has frequently acted as Section Chief during the absence of the other [ ] officers, a GS-14 position. He has been able to handle the job well both

## SECTION E

## CERTIFICATION AND COMMENTS

## 1. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

C/LA/COG [ ]

## 2. BY EMPLOYEE

STATEMENT CONCERNING THIS EVALUATION  
OF MY PERFORMANCE

DATE

SIGNATURE OF EMPLOYEE

HAVE ATTACHED

HAVE NOT ATTACHED

[ ]

## 3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I agree with the ratings given by the rating officer. Mr. Flores is indeed a fine operations officer and should have an exceptionally successful career in operations. The only weakness in him that I have ever noted is an occasional lack of drive and self-motivation and as noted by the rating officer, particularly in recent months, he seems to have cured this and has indeed been going at a fast pace.

Mr. Flores is leaving Cuba Operations Group for a rotational tour in the Office of Training. I believe that when he finishes this tour, he should return for an operational assignment in the Latin America area. He is an exceptionally fine case officer, has a native command of Spanish, and has a way of dealing with his agents that gets the most out of them. Future tours for him should involve supervision of younger case officers and he should begin to move into the managerial aspects of operations.

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chief, LA(D)

## 4. BY EMPLOYEE

I AGREE THAT I HAVE BEEN PREDICTED IN DATE: [ ]

(Signature or emblem) ( ) ( ✓ )

CLASSIFICATION

S E C R E T

FITNESS REPORT

Daniel Flores

cont.

SECTION D

in terms of paper flow and personnel administration. He demonstrates an ability to advance further along these lines. Also during the period under review he participated in an approach against the [redacted] of [redacted] in a Latin America country. Although the recruitment effort was not successful, it was conducted in a professional manner and Mr. Flores used an [redacted] in a very effective manner.

He has been perhaps the most aggressive officer in the Cuba Operations Group in pursuing leads for interviews of [redacted] and [redacted]

During the period under review he conducted at least [redacted] such interviews and developed good assessment data on various targets.

As a native Spanish speaker, Mr. Flores has the ability to [redacted] as a [redacted] and has successfully carried out roles as a [redacted]. This ability to [redacted] has been of great assistance in handling the key case he relinquished only on leaving LA/COG.

Mr. Flores has now overcome an earlier reluctance to be aggressive which former supervisors might have noted. I am confident he will maintain and build further on what I have found to be a highly improved sense of enthusiasm. I am sure he will be a strong contributor to his new component.

\* \* \*

No. 3

He is an officer who merits further responsibility and one who should continue to rise in rank as he assumes these additional responsibilities. It has been a pleasure to work with him and I should like to do so with him in the future.

S E C R E T

E2 IMPDET  
CL BY 025231

SECRET  
CLASSIFICATION

FITNESS REPORT

SECTION A

GENERAL INFORMATION

1. EMPLOYEE NUMBER <b>194737</b>	2. NAME (last, first, middle) <b>Flores, Daniel</b>	3. DATE OF BIRTH <input type="text"/>	4. SEX <b>M</b>	5. GRADE <b>GS-12</b>	6. SD <b>D</b>	
7. OFFICIAL POSITION TITLE <b>Ops Officer</b>	8. OFF/Div Br of Assignment <b>DDO/LA/COG</b>	9. CURRENT STATION <b>Washington, D.C.</b>	10. CODE (if any) <b>X HOB DP</b>			

11. TYPE OF APPOINTMENT

CAREER	RESERVE	CONTRACT	OTHER (spec.)	TEMPORARY	X	ANNUAL	REASSIGN. MENT	SPECIAL
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13. REPORTING PERIOD (from-to)

**1 October 1974 - 30 June 1975**

14. DATE REPORT DUE IN O.P.

**31 July 1975**

SECTION B

QUALIFICATIONS UPDATE

If Qualifications Update form is being submitted with changes and is attached to this report, place the word "YES" in the box to the right. If no changes are required, place the word "NO" in the box at right.

SECTION C

PERFORMANCE EVALUATION

<u>U</u> -Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.
<u>M</u> -Marginal	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.
<u>P</u> -Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.
<u>S</u> -Strong	Performance is characterized by exceptional proficiency.
<u>O</u> -Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1

Case Officer for COG's Latin America area responsible for operational support of LA field Stations Cuba programs.

RATING LETTER

S

SPECIFIC DUTY NO. 2

Case officer for [ ] sensitive [ ] operations.

RATING LETTER

S

SPECIFIC DUTY NO. 3

Develop leads to potential Cuban recruitment targets and personally interview prospective access agents.

RATING LETTER

S

SPECIFIC DUTY NO. 4

Supervisor for [ ] Intelligence Analyst

RATING LETTER

S

SPECIFIC DUTY NO. 5

SPECIFIC DUTY NO. 6

SPECIFIC DUTY NO. 7

RATING LETTER

RATING LETTER

S

RATING LETTER

S

OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties productivity, conduct on job, cooperativeness, judgment, personal traits or habits and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.

RATING LETTER

S

## CLASSIFICATION

SECTION D		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. <del>CONFIDENTIAL</del> Foreign language competence, if required for current position. Supply an opinion rating given in Section C to provide information concerning future personnel action. Manner of performance of management or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.</p> <p>LA/COG is both a Headquarters <del>and</del> <sup>14 '75</sup> and an active opera-</p> <p>As such, Mr. Flores assignment is</p> <p>His performance is being rated in both capacities which means that much higher criteria is being applied than for most Headquarters officers.</p> <p>Mr. Flores has proved to be a professional agent handler, and has been used very effectively in [ ] new, sensitive operations [ ]. Headquarters. Although he did not participate in the recruitment of these sources, Mr. Flores was brought in to provide initial training, and detailed guidance necessary to develop [ ] new assets into reporting sources. One was a complicated case of a [ ] who Mr. Flores helped debrief, then trained and [ ]. The other was a successful [ ] of a source with excellent access to the [ ]. Mr. Flores' job, after being introduced by the recruiting officer, is to make the source into a fully controlled asset and maximize the excellent potential for intelligence information.</p>			
SECTION E		CERTIFICATION AND COMMENTS	
<p><input type="checkbox"/> MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION</p>		<p>1. BY SUPERVISOR</p> <p><input type="checkbox"/> IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</p>	
DATE	OFFICIAL TITLE OF SUPERVISOR		
8 August 1975	ADC/LA/COG		
<p>STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE</p> <p><input type="checkbox"/> NO COPIES ATTACHED      <input type="checkbox"/> HAVE NOT ATTACHED</p>		DATE	SIGNATURE OF EMPLOYEE
		9 Aug. 1975	<i>John D. Cleary</i>
<p>3. BY REVIEWING OFFICIAL</p> <p>COMMENTS OF REVIEWING OFFICIAL</p> <p>LA/COG has [ ] operations officers performing duties similar to those assigned to Mr. Flores--Case officer responsible for recruiting/handling agents directed against a hard target and also staff duties as a Desk Chief. These tasks are [ ] the Latin America Division as these officers serve as [ ] and also as Headquarters desk officers. All [ ] are handled by these [ ] employees. I would rank Mr. Flores in the middle of this group, but it must be taken into consideration that all the other officers are senior in grade.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL		
8 August 1975	AC/LA/COG		
<p>I CERTIFY THAT I HAVE BEEN THE ENTRIE IN ALL SECTIONS OF THIS REPORT</p>		DATE	SIGNATURE OF REVIEWER
		8 Aug. 1975	<i>John D. Cleary</i>
<p>CLASSIFICATION</p>			

~~SECRET~~

-2-

Continuation of Section D

His professional, no-nonsense handling has already contributed to highly significant information (a value quotient of 7.0 with one XX report) on some of the Agency's current Cuba priorities including Cuba's negotiating attitude vis-a-vis the U.S.

In his capacity as Desk officer for field stations in Latin America, Mr. Flores is charged with providing guidance and support aimed at recruitment operations [redacted]. He has conducted interviews of [redacted] in the U.S. and initiated a promising [redacted]

[redacted] He supervises [redacted] intelligence analyst and, together, they effectively ensure timely response to field requests and help stations to identify operational opportunities, recruitment targets and--where necessary--keep them aware of the priority of the Cuban target.

By his performance, Mr. Flores has demonstrated he is a versatile case officer with good operational instincts; he is showing increasing aggressiveness and imaginative support of field stations in their efforts to [redacted]. While he is an excellent agent handler who gets maximum intelligence production from his assets, he is less thorough when handling the administrative details involved in his operations. He needs more supervisory experience, and still tends to rely excessively on his IAs to search for operational leads and conduct operational research.

Mr. Flores was sponsored by the Division, and attended the mid-career course in November 1974. He has excellent potential for further advancement in the Division and has been a significant factor in LA/COG's success over the last year in developing access to Cuba, a recognized hard target.

Continuation of Section E

Subject excels as an agent handler motivating his agents and disciplining them when required to obtain quality intelligence. He handles [redacted] of LA/COG's most sensitive [redacted] and during this period, he has met these [redacted] and in [redacted] [redacted] He has certainly targetted these [redacted] agents against priority objectives and the intelligence produced has been of vital interest to U.S. Government policymakers in this delicate period of Cuban negotiations. Latin America Division has received commendations from

~~SECRET~~

Continuation of Section E

the intelligence community for reports acquired through Mr. Flores. Subject's staff duties include desk chief responsibilities for support and guidance to field programs including the research and targetting required to conduct an effective recruitment program. Although such duties requiring supervision are new to him, he is also making progress in this capacity. With proper guidance and assistance, he will develop into a most effective supervisor.

Mr. Flores native fluency in Spanish and his Latin background have proven most valuable to Cuban operations. In fact he represents himself as [redacted] For an officer his grade, he is very mature, self assured, has good common sense and is certainly a professional. Subject has completed two tours in the field and is an experienced ops officer. He is intelligent, imaginative, uses good tradecraft at all times and has a clear headed approach to the business. He expresses himself well orally and in writing, and works very well with other case officers. Mr. Flores keeps up to date on political, economic and social affairs pertaining to Cuba and he willingly accepts difficult tasks requiring frequent separations from his family.

Subject definitely has potential. He is operationally aggressive and is gaining experience as a manager. Mr. Flores is already performing at a higher level than his grade. In approximately a year, he should be again dispatched to the field as a senior officer responsible for handling [redacted] or [redacted] targets. During the next reporting period, Mr. Flores should receive training in supervision. He is a solid performer in the Cuban Operations Group and has contributed much to our successes during the past year.

~~SECRET~~

## CLASSIFICATION

## FITNESS REPORT

## SECTION A

1. EMPLOYEE NUMBER 194737	2. NAME (last, first, middle) Flores, Daniel	3. DATE OF BIRTH [Redacted]	4. SEX M	5. GRADE GS-12 D
7. OFFICIAL POSITION TITLE Ops Officer	8. OFF/DIV BR OF ASSIGNMENT, CURRENT STATION DDO/LA/COG	9. CODE (if none) Washington, DC X HQS DF		
11. TYPE OF APPOINTMENT CAREER RESERVE CONTRACT OTHER (SPEC)		12. TYPE OF REPORT TEMPORARY X ANNUAL REASIGNMENT SPECIAL		
13. REPORTING PERIOD (FROM-TO) 5 March 1974 - 30 September 1974		14. DATE REPORT DUE IN O.P.		

## SECTION B

## QUALIFICATIONS UPDATE

IF QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.

## SECTION C

## PERFORMANCE EVALUATION

U-Unsatisfactory

Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section D.

M-Marginal

Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.

P-Proficient

Performance is satisfactory. Desired results are being produced in the manner expected.

S-Strong

Performance is characterized by exceptional proficiency.

O-Outstanding

Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.

## SPECIFIC DUTIES

List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).

SPECIFIC DUTY NO. 1

Primary case officer for a sensitive [Redacted]

RATING LETTER

S

SPECIFIC DUTY NO. 2

Provide operational support and guidance for Cuban operations conducted by LA Division Stations.

RATING LETTER

P

SPECIFIC DUTY NO. 3

Direct and supervise Intelligence Assistants assigned to specific areas of responsibilities.

RATING LETTER

S

SPECIFIC DUTY NO. 4

Desk case officer for access agents and support assets in LA Division Stations' Cuban operations.

RATING LETTER

S

SPECIFIC DUTY NO. 5

Search for leads in the U.S. for LA Division Cuban operations and personally debrief and exploit further exploitation.

RATING LETTER

S

SPECIFIC DUTY NO. 6

RATING LETTER

C

## OVERALL PERFORMANCE IN CURRENT POSITION

Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most closely reflects his level of performance.

RATING LETTER

S

## CLASSIFICATION

## SECTION D

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section C--provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness, if the use of individual equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

In a very short time, Mr. Flores has become an important factor in LA/COG's efforts to directly handle Cuban [redacted] and to expand its recruitment program. His fluent Spanish, past operational experience, versatility and ability to [redacted] in most Latin American countries, make him highly qualified for his present assignment. He demonstrates sound operational judgment under often trying conditions, and good ability to communicate effectively both orally and in writing. His frequent TDYs demand long and unusual hours, which he gives ungrudgingly.

Almost immediately after his assignment to LA/COG in March 1974, Mr. Flores was called upon to handle a sensitive [redacted] case. The agent had already been recruited and many of the developmental aspects of the case had been resolved prior to Mr. Flores' introduction, but it still required a Headquarters based case officer to provide the necessary continuity wherever the agent [redacted]. The case is complicated and time-consuming, involving extended TDYs and utmost adherence to good tradecraft procedures. It has developed into one of our most productive sources of [redacted]

## SECTION E

## CERTIFICATION AND COMMENTS

(cont'd)

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE		OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
16 NOV 1974		LA/COG/OPS	[Signature]
STATEMENT CONCERNING THIS EVALUATION OF MY PERFORMANCE		DATE	SIGNATURE OF EMPLOYEE
<input type="checkbox"/> HAVE ATTACHED <input type="checkbox"/> HAVE NOT ATTACHED		6 NOV 1974	[Signature]
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
I concur with the rating officer's comments and performance evaluation. Soon after his arrival at LA/COG, Mr. Flores took over the handling of a sensitive agent. While the agent's bona fides had already been established and his modus operandi determined, considerable ad hoc judgement and direction were required to continue the agent's motivation and ensure his viability. Mr. Flores did extremely well in his guidance of the agent in a series of complicated, extended meetings which took place in [redacted]. Good, professional tradecraft and sound judgement were exhibited by Mr. Flores.			
As to his support of LA Station efforts against the Cuban target.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
16 NOV 1974	DC/LA/COG	[Signature]	
4. BY EMPLOYEE			
I CERTIFY THAT I HAVE BEEN THE ENTRIEE IN ALL SECTIONS OF THIS REPORT		DATE	SIGNATURE OF EMPLOYEE
[Signature]		6 NOV 1974	[Signature]
		CLASSIFICATION	

FITNESS REPORT - Daniel Flores

SECTION D (CONTINUED)

activities in Latin America, due largely to Mr. Flores' professionalism.

Mr. Flores' current assignment is a combination of operational and Headquarters desk responsibilities, the latter calling for the support of field stations in their efforts to develop individual Cuban recruitment programs. His extended TDYs have understandably prevented Mr. Flores from devoting much time to his desk responsibilities and it is somewhat difficult to judge his performance as a desk officer. He has a good grasp of what needs to be done, and his handling of specific tasks indicates good managerial potential. Nevertheless, he does need additional desk experience, especially in areas which will allow him to use his operational ability to support and guide field stations that are developing Cuban operational programs.

COMMENTS BY REVIEWING OFFICIAL (CONTINUED)

this aspect of his performance was less noteworthy, and it is believed more attention and research could have been given to this activity. Mr. Flores writes concisely and well, and his CI/CE instincts are sharp and true. He can be expected to turn in a solid desk performance in the future.

## CONFIDENTIAL

<b>FITNESS REPORT</b>			NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.					
<b>SECTION A.</b>			<b>GENERAL INFORMATION</b>					
1. EMPLOYEE NUMBER <b>194737</b>	2. NAME (last, first, middle) <b>Flores, Daniel</b>		3. DATE OF BIRTH		4. SEX	5. GRADE	6. SD	
7. OFFICIAL POSITION TITLE <b>Ops Officer</b>			8. OFF/DIV/BR OF ASSIGNMENT <b>DDO/WII/Br 3</b>		9. CURRENT STATION			
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER	CAREER PROVISIONAL	RESERVE	ANNUAL	21 MONTH	30-MONTH	<input checked="" type="checkbox"/> REASSIGNMENT	SPECIAL	
CONTRACT	SPECIAL	TEMPORARY	12. REPORTING PERIOD (From to)		13. DATE REPORT DUE IN O.P.			
			<b>31 May 73-4 March 74</b>					
<b>SECTION B</b>			<b>PERFORMANCE EVALUATION</b>					
<u>U</u> -Unsatisfactory <u>M</u> -Marginal <u>P</u> -Proficient <u>S</u> -Strong <u>O</u> -Outstanding			Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described. Performance is satisfactory. Desired results are being produced in the manner expected. Performance is characterized by exceptional proficiency. Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
<b>SPECIFIC DUTIES</b>								
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).								
SPECIFIC DUTY NO. 1								RATING LETTER
<b>Station officer responsible for operations against the MPCHEEK target</b>								<b>S</b>
SPECIFIC DUTY NO. 2								RATING LETTER
<b>Direction of and support for an [redacted] and the [redacted]</b>								<b>S</b>
SPECIFIC DUTY NO. 3								RATING LETTER
<b>Case officer responsible for a [redacted] team</b>								<b>S</b>
SPECIFIC DUTY NO. 4								RATING LETTER
SPECIFIC DUTY NO. 5								RATING LETTER
SPECIFIC DUTY NO. 6								RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>								
Use this section for completing about the importance of all influences his effectiveness in his current position such as performance of specific duties independently, credit for job accomplishments, position he holds, traits or talents and particular influences or factors. Based on your knowledge of employee's level of performance during the rating period, enter the letter of the rating best corresponding to the statement about how much weight reflects the rating of performance.								
RATING LETTER								<b>S</b>

FM 435

CONFIDENTIAL

APR 73 AF

## OFFICE (CONFIDENTIAL)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current performance. Give proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject's tour in [REDACTED] was cut short by the serious illness of his daughter. As a result of this illness it was also necessary for him to spend the months of December and January on emergency leave in the United States, returning without his family in February in order to transfer his ops workload and pack out his personal effects for PCS transfer to Headquarters on 4 March.

Although the undersigned had the privilege of working with Subject only briefly, as rating officer he had the advantage of taking over handling of most of Subject's cases following the departure on emergency leave. Thus he was able to observe first hand and in detail the human material with which Subject had worked, the progress he had made in developing their access and capabilities, and the respect these agents had for him.

During the period covered by this report, Subject continued his pursuit of the MPCHEEK target as his primary operational responsibility. He developed and recruited a [REDACTED] of the [REDACTED] MPCHEEK [REDACTED] to the MPCHEEK [REDACTED] and handled [REDACTED]. He also handled a [REDACTED] and the Station's [REDACTED] via a [REDACTED] who in turn handled [REDACTED]

(Continued)

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE [REDACTED] SIGNATURE OF EMPLOYEE [REDACTED]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION [REDACTED] IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION [REDACTED]

DATE [REDACTED] OFFICIAL TITLE OF SUPERVISOR [REDACTED] TYPED OR PRINTED NAME AND SIGNATURE [REDACTED]

3. BY REVIEWING OFFICIAL

## COMMENTS OF REVIEWING OFFICIAL

As the rater makes clear, Subject will be missed in [REDACTED] and we can only sympathize with the reasons why he must now leave. He was doing the Station a great deal of good and advancing his own career nicely as well. It is worth recalling that Subject presided here in [REDACTED] over what we understand is still a unique operational feat, a [REDACTED] to an MPCHEEK [REDACTED]. Also, Subject was often used on a variety of operational tasks having little to do with his assigned targets because, in the

(Continued)

Date [REDACTED] Initials of the reviewing official [REDACTED] Typed or printed name and signature [REDACTED]

4 Mar 74 COS

/s/ Richard S. Welch

CONFIDENTIAL

**CONFIDENTIAL**

Continuation of Narrative Comments

In carrying this heavy workload, Subject demonstrated that he is a superior agent handler. He succeeded in conveying to these people a sense of mission and participation which has kept their morale and motivation, and hence their production, at a high level. He also insisted upon work and security discipline, with a result that the record of these agents in prompt and reliable appearance for meetings and in responding in writing to requirements is extraordinarily good. They all have a clear idea of what is expected of them, confidence that performance will be rewarded and conversely that non-performance will not be tolerated. Just prior to his departure, Subject successfully terminated an entire [redacted] of long standing, a measure which was decided upon simply because the [redacted] had been [redacted] [redacted] and from a security standpoint replacement seemed to be in order. Letting old agents go is always a delicate and usually a thankless task. It takes finesse and bargaining skill. Subject showed these and more in divesting us of the team without a hitch.

During his last month in [redacted] despite the fact that he was burdened with the problems of closing out his household and the normal operational and administrative cleanup prior to PCS departure, Subject made two very significant contributions to Station objectives. First, he coordinated with the [redacted] the official but necessarily [redacted] visit of a senior BKHERALD officer. Since the Station is [redacted] Subject had to maintain his [redacted] throughout, further complicating this delicate assignment. During the visit, he coordinated frequently with the head of the [redacted] and with the chief administrative aide of the [redacted]. He also participated directly in one meeting with the [redacted]. This was of course not the type of assignment which would normally be entrusted to a "junior officer", but Subject is junior only in relative grade, certainly not in maturity, self-assurance or judgment. Then with only three days left in [redacted] Subject led an [redacted] which entered a building recently purchased by the MPCHEEKS, remained for [redacted] and made two apparently excellent [redacted]

The Station will miss Subject a great deal. As the above incidents demonstrate, when the tough or sensitive assignments came up, he was the officer we turned to most frequently. He never balks, argues inconvenience, or seeks the way out. He is cooperative, helpful, and in a low-key way is always effective. We hope he will not object to the term "old reliable" -- he has been that in [redacted] and more.

*[Signature]*  
**SECRET**

S E C R E T

Continuation of Comments of Reviewing Officer

first instance he was bilingual and could fade into the [redacted] background. But he would not have been so regarded if he had not shown ample good sense, zeal, and balanced judgment in unfamiliar situations. We hope Subject can get overseas again within a reasonable time and consider that the Station that gets him will be fortunate.

MURKIN

RECORDED - INDEXED

## CONFIDENTIAL

FITNESS REPORT			GENERAL INFORMATION					
			NOTE: Supervisor or Reviewing Official may assign a higher classification if CONFIDENTIAL is not adequate for the report when completed.					
<b>SECTION A.</b>			<b>GENERAL INFORMATION</b>					
1. EMPLOYEE NUMBER 036130	2. NAME (last, first, middle) Flores, Daniel		3. DATE OF BIRTH	4. SEX M	5. GRADE GS11	6. SD D		
7. OFFICIAL POSITION TITLE Operations Officer		8. OFF/DIV/BR OF ASSIGNMENT DDO/WII/3	9. CURRENT STATION					
10. TYPE OF APPOINTMENT			11. TYPE OF REPORT					
X CAREER CONTRACT	CAREER PROVISIONAL SPECIAL*	RESERVE TEMPORARY	XX ANNUAL 12. REPORTING PERIOD (From-to) 1 July 1972-31 May 73	21 MONTH	30 MONTH	REASSIGNMENT	SPECIAL	
<b>SECTION B. PERFORMANCE EVALUATION</b>								
<p><u>U</u>-Unsatisfactory      Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><u>M</u>-Marginal      Performance is deficient in some aspects. The reasons for assigning this rating should be noted in Section C and remedial actions taken or recommended should be described.</p> <p><u>P</u>-Proficient      Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><u>S</u>-Strong      Performance is characterized by exceptional proficiency.</p> <p><u>O</u>-Outstanding      Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>								
<b>SPECIFIC DUTIES</b>								
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>								
SPECIFIC DUTY NO. 1  Station officer responsible for operations against the MPCHEEK target.							RATING LETTER S	
SPECIFIC DUTY NO. 2  Handler for sensitive [redacted]							RATING LETTER O	
SPECIFIC DUTY NO. 3  Supervise principal agent							RATING LETTER S	
SPECIFIC DUTY NO. 4  Miscellaneous operational support activity, including direction of a [redacted] team.							RATING LETTER S	
SPECIFIC DUTY NO. 5							RATING LETTER	
SPECIFIC DUTY NO. 6							RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>								
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular tendencies or talents. Based on your knowledge of employee's overall performance during the rating period, prime RATING LETTER in the rating area corresponding to the statement which most closely reflects his level of performance.</p>							RATING LETTER S	

## CONFIDENTIAL

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide background for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Following realignment of Station officer assignments last year, Subject was given the responsibility for operations against the MPCHEEK "hard target". He also assumed additional tasks in more traditional areas, such as coverage of the [redacted]

[redacted] of the [redacted] and [redacted]. The breadth of these operational commitments attests Subject's professional ability and versatility. (This would be a senior case officer's load by any description and Subject's performance at it was the reason behind our recommendation for accelerated promotion last year.)

Particularly against the difficult MPCHEEK target, this officer has displayed admirable determination despite the inherent frustrations and disappointments of working against this remote and suspicious group. During the period under review, his job has been the more difficult since the MPCHEEKS, in all probability [redacted] Station [redacted] (in which Subject played a major role), have withdrawn into a defensive shell which makes access operations verge on the impossible. Nevertheless, he has continued to probe their defenses, and has managed to develop [redacted] leads which, with the exercise of patience and application of his proven operational resources, could eventually [redacted] to the [redacted] MPCHEEK Mission here. This officer refuses to become discouraged, a quality officers working on hard targets must have.

Special mention is made of Subject's successful bid to make recontact and establish regular meetings with a [redacted]. The agent had broken contact with his former handler in the belief that such action was dictated by his security situation. Our choice of Subject to attempt to recontact this asset was dictated by his experience in dealing with skittish [redacted] and our belief that Subject could bring it off with tact, reading the situation. /CONTINUED/

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

28 June 1973

/s/ Daniel Flores

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

20

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

28 June 1973

Deputy Chief of Station

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

As described, this officer is a steady and solid performer who carries a major case load securely, productively, and without complaint. He has even volunteered to take on additional work when he has seen opportunities to help the Station's overall mission. Because he [redacted] he is often drafted for all kinds of ad hoc operational work. This is invariably well done. He is operationally aggressive but also shows lively awareness of the tricky operational climate here and does not push beyond what the traffic will bear. His agents respect his seriousness, which permits him to get more utility out of them. He is a pillar of this Station.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

2 July 1973

Chief of Station

/s/ Richard S. Welch

CONFIDENTIAL

C O N F I D E N T I A L

Section C continued.....

as it developed, and make appropriate on-the-spot adjustments to control the asset's reactions. All this had to be accomplished with great regard to security because of the [redacted] Subject's performance has been effective and, given the operation's importance, can really be called outstanding. The agent is again a prime source on the [redacted] which is crucial to developments locally.

Further, this officer continues to manage an [redacted] agent who in turn [redacted] and [redacted] so directing these efforts that they contribute effectively to overall Station objectives. More recently, Subject has taken over the [redacted] of a new [redacted] targetted against a [redacted] and is carrying it through successfully. This officer also handles much of the support requirements for his various operations, including management of [redacted] overseeing a small [redacted] and acquisition of rental cars and property [redacted]. There is little doubt that some of Subject's success can be attributed to his Latin background and fluent Spanish. But both of these advantages might be wasted by a less capable all-round officer. In his case, they provide him with complementary skills that enhance his superior performance. In the view of the reporting officer, Subject carries more than his own share here in [redacted] in a manner normally calling for an officer of considerably more senior grade and experience.

C O N F I D E N T I A L

## SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				036130	
<b>SECTION A</b>					
1. NAME <b>Flores Daniel</b>			2. DATE OF BIRTH M GS-11 D		
3. SEX			4. GRADE		
5. OFFICIAL POSITION TITLE <b>Ops Officer</b>			6. CURRENT STATION DDP/WH/3		
7. OFF/DIV/BR OF ASSIGNMENT			8. CURRENT STATION		
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY  <b>CAREER-PROVISIONAL (See Instructions - Section C)</b>			10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):  <b>SPECIAL (Specify):</b>		
11. DATE REPORT DUE IN O.P. <b>31 August 1972</b>			12. REPORTING PERIOD (From - To) <b>24 September 1971 - 30 June 1972</b>		
<b>SECTION B</b> PERFORMANCE EVALUATION					
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>					
<b>SPECIFIC DUTY NO. 1</b> Direction of and administrative support for [redacted] principal agents whose efforts he directs [redacted] and [redacted]					RATING LETTER <b>S</b>
<b>SPECIFIC DUTY NO. 2</b> Coordinator of all Station operations against the [redacted] including management of the project covering this activity.					RATING LETTER <b>S</b>
<b>SPECIFIC DUTY NO. 3</b> Case officer in charge of the Station's [redacted]					RATING LETTER <b>P</b>
<b>SPECIFIC DUTY NO. 4</b> [redacted]					RATING LETTER
<b>SPECIFIC DUTY NO. 5</b> [redacted]					RATING LETTER <b>S</b>
<b>SPECIFIC DUTY NO. 6</b> .....IMPDET..... (Unless otherwise, insert GS or grade)					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					
					RATING LETTER <b>S</b>

## SECRET

(After Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

In the period of this report, Subject established himself and his family at this post and undertook the direction of the Station's operations against the [redacted] which had formerly been handled by an officer two grades senior to Subject. He has proved equal to the task. He learned his new assignment rapidly and adapted well to the handling of his cases through [redacted] agents, a security requirement of the [redacted] which can be frustrating for an aggressive officer with fluent Spanish such as Subject. However, he has shown maturity and superior handling ability in directing his assets against the [redacted] and particularly the [redacted]. His intimate knowledge of the [redacted] enabled him to plan secure contact with a [redacted] who at first appeared genuine. After thoroughly debriefing this individual, drawing upon his knowledge of the [redacted] Subject was able to recommend no continuing contact with him due to specific fabrications on the part of the [redacted].

He is careful in management of funds entrusted to him for his operations and provides required administrative and operational reports in a timely manner. There have been past comments on Subject's weakness in writing. He has worked hard on this, and the rating officer feels that he is now competently producing the reports required. Subject understands that this is an area that requires continuing attention for a growing professional.

/CONTINUED/

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE SIGNATURE OF EMPLOYEE  
15 August 1972 /s/ Daniel Flores

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

10

DATE OFFICIAL TITLE OF SUPERVISOR  
15 August 1972 Deputy Chief of StationTYPED OR PRINTED NAME AND SIGNATURE  
/s/ [redacted]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject has come up the hard way, both in pushing on to finish his education and in BKTRUST. As a result he is way under-graded for his maturity and for his operational contributions. That we have given Subject a major responsibility here (STPAGODA) attests to how much confidence we have in him and his ability. He is, of course, bi-lingual and mixes well with [redacted] an advantage he uses well. A good "street" operator, he still has a way to go in organizing his paper work and in relating to HQs needs.

DATE OFFICIAL TITLE OF REVIEWING OFFICIAL TYPED OR PRINTED NAME AND SIGNATURE

15 August 1972

Chief of Station

/s/ Richard S. Reich

SECRET

SECTION C continued.....

A comment must be made on Subject's great ability to adjust rapidly to one-time and target of opportunity assignments. His performance in meeting with [redacted] high level agents of [redacted] who had to be met during stays in [redacted] and his on-site assistance in an [redacted] against a priority target have been of the highest order. No doubt his fluent Spanish greatly assisted him in these tasks, but his experience and good judgment were major factors in his excellent performance in the role of utility operations officer.

To exploit Subject's talents to the fullest, and provide him with the professional challenge equal to his ability, he has now been assigned the management and handling of the difficult [redacted] a top priority for the Station. This is a true measure of our confidence in him.

## SECRET

(Edition Filled In)

<b>FITNESS REPORT</b>			EMPLOYEE SERIAL NUMBER <b>036130</b>
<b>GENERAL</b>			
1. NAME (Last) (First) (Middle) <b>Flores, Daniel</b>		2. DATE OF BIRTH [Redacted]	3. SEX <b>M</b>
4. OFFICIAL POSITION TITLE <b>Ops Officer</b>		5. GRADE <b>GS-10</b>	6. SD <b>D</b>
7. OFFICER/ENLISTED OR ASSIGNMENT <b>DDP/WH/3</b>		8. CURRENT STATION <b>WHS</b>	
9. CHECK (✓) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify): <b>[Redacted]</b>		10. CHECK (✓) TYPE OF REPORT INITIAL <input type="checkbox"/> PRE-ASSIGNMENT SUPERVISOR ANNUAL <input type="checkbox"/> PRE-ASSIGNMENT EMPLOYEE SPECIAL (Specify): <b>[Redacted]</b>	
11. DATE REPORT DUE IN O.P. <b>31 October 1971</b>		12. REPORTING PERIOD (From - To) <b>1 May 1971 - 30 September 1971</b>	
<b>SECTION B PERFORMANCE EVALUATION</b>			
<b>U-Unsatisfactory</b>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.		
<b>M-Marginal</b>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.		
<b>P-Proficient</b>	Performance is satisfactory. Desired results are being produced in the manner expected.		
<b>S-Strong</b>	Performance is characterized by exceptional proficiency.		
<b>O-Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.		
<b>SPECIFIC DUTIES</b>			
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).			
SPECIFIC DUTY NO. 1			RATING LETTER
SPECIFIC DUTY NO. 2			RATING LETTER
SPECIFIC DUTY NO. 3			RATING LETTER
SPECIFIC DUTY NO. 4			RATING LETTER
SPECIFIC DUTY NO. 5			RATING LETTER
SPECIFIC DUTY NO. 6			RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>			
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperation, command personnel, work attitude, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.			RATING LETTER

**SECRET**

**SECTION C**

**NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

AUG 17 2 17 PM '71  
Mr. Daniel Flores completed his first tour in [redacted] and departed the field on 28 May 1971. Following home leave, Mr. Flores returned to Headquarters in August for approximately two months training prior to his next assignment to [redacted]. This training included Weapons Familiarization and Defensivo Driving, CA, [redacted] Communist Party, TSD briefings, and on-the-desk Reports Writing Familiarization.

Since Mr. Flores has been on leave or training status for most of this reporting period, no meaningful rating can be given.

**SECTION D**

**CERTIFICATION AND COMMENTS**

**1.**

**BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

**2.**

**BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

employee in training

DATE

OFFICIAL TITLE OF SUPERVISOR

16 August 1971

WII/Personnel Officer

TURE

**3.**

**BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL - TYPED OR PRINTED NAME AND SIGNATURE

**SECRET**

SECRET

(When Filled In)

<b>FITNESS REPORT</b>				EMPLOYEE SERIAL NUMBER 036130
<b>SECTION A</b>				
1. NAME (Last) (First) (Middle) <b>Flores, Daniel</b>		2. DATE OF BIRTH [Redacted]	3. SEX <b>M</b>	4. GRADE W-10
5. OFFICIAL POSITION TITLE <b>Ops Officer</b>		6. OFF CIV OR OF ASSIGNMENT <b>DDP/WIL/3</b>	7. CURRENT STATION [Redacted]	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):		9. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL SPECIAL (Specify):	10. CHECK (X) ASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ASSIGNMENT EMPLOYEE	
11. DATE REPORT DUE IN O.P. [Redacted]		12. REPORTING PERIOD (From To) <b>1 October 1970/30 April 1971</b>		
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>				
<b>U-Unsatisfactory</b>	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.			
<b>M-Marginal</b>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.			
<b>P-Proficient</b>	Performance is satisfactory. Desired results are being produced in the manner expected.			
<b>S-Strong</b>	Performance is characterized by exceptional proficiency.			
<b>O-Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
<b>SPECIFIC DUTIES</b>				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				
SPECIFIC DUTY NO. 1 Case Officer responsible for a Eaze project targetted against the [Redacted]		RATING LETTER <b>S</b>		
SPECIFIC DUTY NO. 2 Case Officer responsible for a sensitive technical operation including the selection of intelligence resulting from the operation.		RATING LETTER <b>O</b>		
SPECIFIC DUTY NO. 3 Development of new agent assets.		RATING LETTER <b>P</b>		
SPECIFIC DUTY NO. 4 Preparation of dispatches, intelligence reports and other correspondence pertinent to his area of responsibility.		RATING LETTER <b>P</b>		
SPECIFIC DUTY NO. 5		RATING LETTER		
SPECIFIC DUTY NO. 6		RATING LETTER		
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				RATING LETTER <b>S</b>

## SECRET

SECTION C		NARRATIVE COMMENTS									
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>There has been little change in Subject's performance since the submission of his last report covering the period through 30 September 1970.</p> <p style="text-align: center;">U.S. GOVERNMENT</p> <p>The highpoint of his activities during this period, as it has been throughout his tour, has been his management of a sensitive technical operation which has been a consistent producer of unique and high level intelligence. This has been a good performance on Subject's part indicative of his professional capability to conduct clandestine operations.</p> <p>Subject's writing ability has improved during this period, and there is little doubt that his efforts in this regard are paying off. Further experience should see continued improvement of his writing skills.</p> <p>As Subject's first tour comes to a close he can look back on a generally strong performance in all phases of his operational activity on behalf of the Base's objectives.</p>											
SECTION D		CERTIFICATION AND COMMENTS									
<p>1. BY EMPLOYEE</p> <p>I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</p> <table border="1"> <tr> <td>DATE 3 May 1971</td> <td colspan="3">SIGNATURE OF EMPLOYEE <i>/s/ Daniel Flores</i></td> </tr> </table> <p>2. BY SUPERVISOR</p> <p>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 20</p> <p>IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION</p> <table border="1"> <tr> <td>DATE 3 May 1971</td> <td>OFFICIAL TITLE OF SUPERVISOR COB,</td> <td colspan="2">TYPED OR PRINTED NAME AND SIGNATURE <i>/s/</i></td> </tr> </table> <p>3. BY REVIEWING OFFICIAL</p> <p>COMMENTS OF REVIEWING OFFICIAL</p> <p>I concur in the ratings and remarks of the supervisor. During his first tour abroad, Subject has done very well in his main fields of activity. His outstanding attribute at the moment is his persistence not only in going after operational targets but also in improving himself. He has encountered some difficulty in presenting his ideas in written form but he has faced up to this problem and, as the rating officer notes, has made significant improvement.</p>				DATE 3 May 1971	SIGNATURE OF EMPLOYEE <i>/s/ Daniel Flores</i>			DATE 3 May 1971	OFFICIAL TITLE OF SUPERVISOR COB,	TYPED OR PRINTED NAME AND SIGNATURE <i>/s/</i>	
DATE 3 May 1971	SIGNATURE OF EMPLOYEE <i>/s/ Daniel Flores</i>										
DATE 3 May 1971	OFFICIAL TITLE OF SUPERVISOR COB,	TYPED OR PRINTED NAME AND SIGNATURE <i>/s/</i>									
(Continued)											
DATE 17 May 71	OFFICIAL TITLE OF REVIEWING OFFICIAL COS, Qaito	TYPED OR PRINTED NAME AND SIGNATURE <i>/s/</i>									

SECRET

S E C R E T

Continuation of Comments by Reviewing Official

Subject has a clear-headed approach to the collection of intelligence and is realistic in evaluating potential sources. His fluency in the Spanish language has facilitated his movement in the local community and he has developed several potentially useful sources and identified others.

In considering this officer for promotion, two facts should be kept in mind:

a. He is probably older and certainly more mature than the average officer at his grade level. He is anxious to get ahead and this explains much of his initiative and drive.

b. The rating officer has rated him very realistically which, in my view, adds to the importance of the outstanding rating given him on Specific Duty No. 2.

S E C R E T

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPCRT

Weapons Training/Defensive Driving Course No. 1/72      2-6 August 1971  
Date

TRAINEE: FLORES, Daniel

OFFICE: WH

PURPOSE AND SCOPE OF COURSE:

The course provides basic proficiency training in the use of weapons for self-defense and in the techniques of defensive driving to counter vehicular kidnaping for Agency officers being assigned to hostile or unstable political and operational environments abroad.

ACHIEVEMENT RECORD:

This is to certify that Mr. Flores has satisfactorily completed the prescribed course of instruction.

FOR THE DIRECTOR OF TRAINING:



*✓* Chief, Special Activities Branch

9 August 1971

Date

C-O-N-F-I-D-E-N-T-I-A-L

Certification of Handgun Qualification

9 August 1971

Date

Mr. [redacted] and  
(Instructor SAB Staff, OTG, ISOLATION)  
Identity

Trainee FLORES, Daniel, WH  
Identity

on 2-6 August, date Mr. Flores was given 28 hours

instruction in firing techniques, weapon care and safe weapons handling

procedures. Subsequently Mr. Flores fired the handgun qualifica-

tion course with Revolver(Cal.38) achieving a score of 258 out  
Automatic(Cal.-9mm) 261 out  
weapon

of a possible 300. Mr. Flores demonstrated that he  
identity

had absorbed the instruction on safe weapon handling and that he exercises

due care and discretion. Accordingly Mr. Flores is certified as  
identity

Automatic (Cal. - 9mm)  
qualified with the Revolver (Cal. - 38) as of this date.  
weapon

Signed

[redacted]  
SAB/OTG

Instructor Identity

S E C R E T

Continuation of Narrative Comments

the target is good. The project is, however, in need of good human reporting assets and it is expected that as Subject overcomes a weakness mentioned in the next paragraph he will be able to devote more of his time to this important task.

The Subject has encountered some difficulty in the preparation of written material -- dispatches, intelligence reports -- and finds it necessary to spend an extended portion of his time on its preparation. The rater has discussed this with Subject on several occasions, and it is believed that his difficulty is due to a lack of experience, and that in time and with a continuing effort on his part he will develop his writing skills.

The Subject's overall attitude and response towards his professional responsibilities during the first tour have been positive. He is interested in the kind of work he is doing, likes it and is willing to put in the kind of long hours it sometimes demands without complaint.

Continuation of Comments of Reviewing Official

of the Base. He responds positively to guidance and direction; he is eager for new opportunities to enlarge his experience and knowledge. He appears to be completely motivated toward the work of this organization; it is a pleasure to have him in [redacted]

S E C R E T

Reviewed by (Signature)

**SECRET**

Cohen Bellard Inc.

**SECTION C**

**NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost considerations in the use of personnel, space, equipment and funds must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

The period covered by this report encompasses the middle portion of the Subject's first tour as a Case Officer. His performance during this period has been balanced in that he has shown the kind of intelligence and maturity necessary to successfully carry out clandestine operational activity. He has also shown a weakness which he will need to overcome in order to achieve his full operating potential.

The Subject has turned in fine performance in the overall management of a very important and sensitive [redacted] operation which has been under his care since the pre-installation phase. His sure and careful handling of all succeeding phases of this operation led to a secure, uncomplicated installation, the recruitment and training of support agents, and the dissemination of valuable intelligence information. Subject's natural fluency in the Spanish language has been especially useful in this operation. His handling of this installation has been of a high professional caliber throughout.

The Subject is also responsible for the management of a project targetted against the [redacted]. His handling of this project has been good: he is a good agent handler; knows how to target his assets against objectives of most importance; and, his knowledge of

(Continued)

**SECTION D**

**CERTIFICATION AND COMMENTS**

1.

**BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

30 Oct, 1970

SIGNATURE OF EMPLOYEE

/s/ Daniel Flores

2.

**BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

30 Oct, 1970

/s/

3.

**BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

I agree with the ratings. This has been a good year for Subject, one which has given him a rather unusual opportunity to learn many facets of the work of this organization and one in which he has shown a very satisfactory level of accomplishment. Shortly after his arrival in [redacted] he became, for a short time, the Acting Chief of Base, and through that period and the ensuing change in Base Chiefs, he showed a professional maturity we felt to be exceptional for a young officer on his first tour. He has worked hard and intensely for improvement in the quantity and quality of his operational production, and he has collaborated very effectively with the other officers

(Cont'd next)

DATE

REVIEWING OFFICIAL'S SIGNATURE

30 Oct, 1970

CDS

**SECRET**

~~SECRET~~

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 026120	
<b>SECTION A</b>			<b>GENERAL</b>				
1. NAME <b>Flores, Daniel</b>	(Last)  <b>Ops Officer</b>	(First)	(Middle)	2. DATE OF BIRTH <b>4 Aug 1935</b>	3. SEX <b>M</b>	4. GRADE IS. SD <b>GS-10</b>	
5. OFFICIAL POSITION TITLE			5. OFFICER OR ASSIGNMENT <b>DDP/XH/Branch 3</b>				
6. CHECK (X) TYPE OF APPOINTMENT			7. CHECK (X) TYPE OF REPORT				
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	INITIAL		REPORT-CHAMBER SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT-EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From- To) <b>1 October 1969 - 30 September 1970</b>				
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>							
<u>U</u> -Unsatisfactory	Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe actions taken or proposed in Section C.						
<u>M</u> -Marginal	Performance is deficient in some respects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.						
<u>P</u> -Proficient	Performance is satisfactory. Desired results are being produced in the manner expected.						
<u>S</u> -Strong	Performance is characterized by exceptional proficiency.						
<u>O</u> -Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities, MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1							RATING LETTER <b>S</b>
Case Officer responsible for Base project targetted against the [redacted]							T.E. 4.2 ✓
SPECIFIC DUTY NO. 2							RATING LETTER <b>S</b>
Case Officer responsible for a sensitive [redacted] operation including the selection of the intelligence resulting from the operation							L.E. 6.1 ✓
SPECIFIC DUTY NO. 3							RATING LETTER <b>S</b>
The development of new agent assets and operations							L.E. 5.3 ✓
SPECIFIC DUTY NO. 4							RATING LETTER <b>P</b>
Preparation of dispatches, intelligence reports and other correspondence pertinent to the operation in his area of responsibility							L.E. 5.3 ✓
SPECIFIC DUTY NO. 5							RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 6							RATING LETTER <b>P</b>
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							RATING LETTER <b>S</b>
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct or job performance, your need for personnel with a definite and particular function to perform. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER <b>S</b>

This last question concerns about the employee which will assume his/her functions in his current position such as performance of specific duties, productivity, standards of job performance, your need for personnel make a decision and potential limitations in talents. Based on your knowledge of employee's current performance during the rating period place the letter in the rating box corresponding to the example which most accurately reflects his level of performance.

卷之三

SECRET

Section C

Narrative Comments, Cont'd.

disciplined, effective manner enabling him to maintain a continuity and productivity within the Base operational requirements with security and dispatch.

Socially Subject and his wife are proving to be good mixers and both are gaining in popularity within the local [redacted] communities. They both have gained the respect and appreciation of the [redacted] complex not only as compatible personalities, but in her willingness to participate actively in [redacted] endeavors and his professional cooperative attitude. Their optimistic and positive conduct at official and non-official functions is a credit to the Base.

Subject's native fluency in Spanish and his Latin background is proving to be a definite asset in the performance of his assigned operational tasks and ability to handle agent assets amicably and productively.

He maintains accurate accounting records and is demonstrating responsible acute cost consciousness in the use of funds and properties.

This rater's principal criticism of this employee is his tendency toward impulsiveness and too-quick judgement before weighing all the facts and implications in the pursuit of his operational requirements; however, this weakness is more a function of his inexperience in the field and will be resolved as he gains more field experience.

Subject, although exhibiting resourcefulness and imagination in performing his assigned operational tasks also has a tendency to accept the judgement of other senior grade officers too readily rather than express his own convictions and trust in his own assessment of a situation.

This rater has concealed this Officer regarding these tendencies and he is taking measures to rectify them.

In Judging his over all performance, this Rater is of the opinion if he continues to apply himself in handling tasks worthy of a senior grade officer, he should be considered for a promotion to the GS-10 level at the earliest opportunity.

RYBERT  
SECRET

## SECRET

(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER 036130		
<b>SECTION A</b>					
GENERAL					
1. NAME (Last) <b>Flores, Daniel</b> (First) (Middle)		2. DATE OF BIRTH 11-1-35		3. SEX M	4. GRADE SG-00
5. OFFICIAL POSITION TITLE <b>Ops Officer</b>		6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/Br 3		7. CURRENT STATION	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY  <input type="checkbox"/> CAREER/PROVISIONAL (See Instructions - Section C)  <input type="checkbox"/> SPECIAL (Specify):			9. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR  <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYER  <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 13 May 1969 - 30 September 1969			12. REPORTING PERIOD (From To)		
<b>SECTION B</b> PERFORMANCE EVALUATION					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1		Case Officer responsible for handling Base operations and assets targetted against hard- and soft-line communist activities in the [redacted] of [redacted]			RATING LETTER S
SPECIFIC DUTY NO. 2		Case Officer responsible for the handling of [redacted] sensitive [redacted] operations. He is also responsible for the translations, processing, and dissemination of the relevant intelligence info.			RATING LETTER S
SPECIFIC DUTY NO. 3		Case Officer of [redacted] assets targetted against the [redacted] within [redacted] groups.			RATING LETTER P
SPECIFIC DUTY NO. 4		Development of new contacts and operations, including following up operational leads and recruitment pitches.			RATING LETTER P
SPECIFIC DUTY NO. 5		Case Officer responsible for writing his own intelligence disseminations prepared from information obtained from his agent assets.			RATING LETTER P
SPECIFIC DUTY NO. 6		Drafts operational correspondence, Project Renewals, and Progress Reports.			RATING LETTER S
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					
RATING SECRET		RATING LETTER S			

## SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

UCI 70 1949 AF '69

This employee, a GS-09, arrived PCS at the [ ] Base on 13 May 1969 and has been under this Rater's supervision during this four and one-half month period. [ ] is his first oversea assignment with this Agency.

During this short reviewing period, this Officer has demonstrated a marked insight and knowledgeableness of the operations he has been assigned, and has provided a number of good ideas and suggestions for the betterment of these operations. Subject is proving to be a hard worker and has not complained of the many extra hours he has devoted to his operations. He has accepted responsibilities without hesitation and is not afraid to take on difficult tasks using initiative and ingenuity in their completion. This latter quality has been amply demonstrated when the Rater was unexpectedly confined to a hospital in the [ ] for the full month of August 1969, leaving this employee solely responsible for the Base as the only inside Case Officer at the Base during this time. Rater's absence corresponded with a change in Case Officer PCS assignments at the Base, which left the Base temporarily depleted of Officers. During this period, Subject exhibited an ability and maturity expected of an officer of higher grade and greater field experience. He organized his increased workload in a

...Continued...

## SECTION D

## CERTIFICATION AND COMMENTS

## BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2 October 1969

/s/ Daniel Flores

2.

## BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

2 October 1969

Chief of Base

/s/ [ ]

BY REVIEWING OFFICIAL

## COMMENTS OF REVIEWING OFFICIAL

This Officer has made a most impressive beginning in [ ]. He has in a few short months adapted to new tasks and a new environment with mature, if modest, assurance and a professional approach which speaks highly for the training and experience he has had. He has taken on, in the absence of the Chief of Base and other senior officers, responsibilities uncommon to an officer of his junior position, and he has handled them in a superior fashion. He and his wife have entered into their representational responsibilities with great enthusiasm and effectiveness, and I predict a most highly successful tour for him in [ ]. Because he has shown a personal and professional competence beyond his grade level, it is strongly recommended that he be considered for promotion to GS-10 at the earliest opportunity.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

16 October 1969

Chief of Station

/s/ [ ]

SECRET

## SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130	
<b>SECTION A</b>					
GENERAL					
1. NAME <b>Flores Daniel</b>	(Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX <b>M</b>	4. GRADE <b>GS-08</b>	5. SD <b>D</b>
6. OFFICIAL POSITION TITLE <b>OpH Officer</b>			7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/WH/4</b>		
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER=PROVISIONAL (See Instructions - Section C)</small>			9. CURRENT STATION <b>HQS</b>		
10. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <small>INITIAL=REASSIGNMENT SUPERVISOR ANNUAL=REASSIGNMENT EMPLOYEE</small>			11. SPECIAL (Specify):		
12. DATE REPORT DUE IN O.R. <b>19 September 1968 - 30 April 1969</b>			13. REPORTING PERIOD (From To)		
<b>SECTION B</b> PERFORMANCE EVALUATION					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 <b>Operations officer handling the Headquarters direction and support of FI projects and activities.</b>		RATING LETTER <b>S</b>			
SPECIFIC DUTY NO. 2 <b>Preparation of operational correspondence, dispatches, cables and special memoranda.</b>		RATING LETTER <b>P</b>			
SPECIFIC DUTY NO. 3 <b>Coordination of operational matters with other components and desks.</b>		RATING LETTER <b>P</b>			
SPECIFIC DUTY NO. 4		RATING LETTER			
SPECIFIC DUTY NO. 5		RATING LETTER			
SPECIFIC DUTY NO. 6 <i>13 MAY 1968</i> <i>sgm</i>		RATING LETTER <b>P</b>			
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					
RATING LETTER <b>P</b>					

## SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach separate sheet of paper.

Mr. Flores did a fine job while he was assigned to the Chile desk. He had responsibility for a variety of FI projects, including several complex and sensitive ones, which he ably handled. He had a full workload and in addition to his assigned responsibilities he was given FI assignments of every type as they arose. On one occasion he was sent on an operational trip to [redacted] where he was to contact, assess and support a target personality. Owing to circumstances beyond his control nothing went as expected but Mr. Flores, acting alone, improvised and adapted to the situation. This is indicative of the initiative and eagerness he displayed in his desk work. He was willing to learn and he accepted guidance and instruction to the letter. In addition Mr. Flores writes well and this is always an asset.

Mr. Flores is fluent in Spanish. It is my impression that if there is one thing that Mr. Flores wants to be that is a field case officer. He is now getting that chance. He will soon leave on an assignment to [redacted]. I have no doubt that he will do very well.

Mr. Flores did not have any managerial duties.

## SECTION D

## CERTIFICATION AND COMMENTS

## BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
April 28, 1969	[Signature]

## BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
5 months	

DATE	OFFICIAL TITLE OF SUPERVISOR	T	R
28 April 69	C/WH/4/Chile		

## BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL
--------------------------------

I concur in the above assessment.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
29 April 1969	Chief, WH/4	Raymond A. Warren

SECRET

STANFORD LINCOLN SCHOOL OF BUSINESS

1968 STANFORD UNIVERSITY GRADUATE PROGRAM  
Serial No.

FLORES, Daniel 07 036130

DPP WH REPORT OF THE CPT OF THE DPP WH DIVISION FOR THE REPORTING PERIOD 11 NOV 1968 - 31 OCT 1968

30 November 1968      17 December 1967 - 31 October 1968

b. This career officer has been assigned to conduct of the Integrated Program with extensive training in **Clandestine Operations**.

Detailed evaluations of his performance in each course are contained in his Officer Personnel folder. Definition of rating letter corresponds to that in Section B, Standard Report Form 45-64-6).

OVERALL PERFORMANCE IN INTEGRATED PROGRAM Proficient

c. COMMING AND PRACTICING OBSERVATIONS:

Mr. Flores entered the CT Program on 11 December 1967, sponsored by DDP/WH Division. His work during formal training was characterized by determination, hard work, and a strong ambition to become a successful Clandestine Services operations officer. He responded well to supervision and guidance and experienced no difficulties in assimilating the principles and techniques covered by the instruction. In Operations Course Phase I, the key course for DDP case officers, he achieved an overall performance rating of HIGH PROFICIENT.

At the previous request of his Division Chief, Mr. Flores was, effective 10 October 1968, reassigned to DDP/WH Division.

27 NOV 1968  
*OT*

25 November 1968

*McGarry*  
John Gerry

SECRET  
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER O 3 C 1 3 0		
<b>SECTION A</b>					<b>GENERAL</b>		
1. NAME <b>FLORES, Daniel</b>	(Last) FLORES	(First) Daniel	(Middle)	2. DATE OF BIRTH	3. SEX <b>M</b>	4. GRADE <b>GS-05</b>	
5. OFFICIAL POSITION TITLE <b>Intel Clerk</b>			6. OFF/DIV/DR OF ASSIGNMENT <b>DDP/WH/COG</b>		7. CURRENT STATION <b>WASH. D.C.</b>		
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify) _____			9. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify) <b>Recommendation for Promotion</b>		10. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P. 1 February 1967			12. REPORTING PERIOD (From To) 15 June 1967				
<b>SECTION B</b>					<b>PERFORMANCE EVALUATION</b>		
<b>W - Weak</b>	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.						
<b>A - Adequate</b>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.						
<b>P - Proficient</b>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.						
<b>S - Strong</b>	Performance is characterized by exceptional proficiency.						
<b>O - Outstanding</b>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1	Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assembles lead files, DEM collates data on hand and adds information received in preparation for target analysis.						RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2	Screens Cuban [redacted] for information of value in the branch counter espionage-counter intelligence records and for operational data.						RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 3	Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.						RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4	Prepares translations from Spanish to English and English to Spanish of operational correspondence.						RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personnel traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							
RATING LETTER <b>S</b>							

## SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Major areas of performance of manager or supervisory duties and cost savings in the use of personnel, space, equipment and funds, must be commented on. If necessary, If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Flores is a part-time staff employee who works a maximum of 19½ hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.

The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cases which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.

Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

June 11, 1967

John J. Trottin

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

DC/WII/COG/CICS

Carl Trottin

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I would rate Mr. Flores essentially the same as Mr. Trottin. I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.

NAME

OFFICIAL TITLE OF REVIEWING OFFICIAL

C/WII/COG/CICS

SECRET

SECRET  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER
				036130
<b>SECTION A</b>				
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	
Flores Daniel			M	3. SEX
4. GRADE			5. SD	
5. OFF/DIV/BR OF ASSIGNMENT			6. CURRENT STATION	
DDP/WH/COG			WASH., D.C.	
7. CHECK (X) TYPE OF APPOINTMENT				
CAREER	RESERVE	TEMPORARY	8. CHECK (X) TYPE OF REPORT	
CAREER/PROVISIONAL (See Instructions - Section C)			X INITIAL	REASSIGNMENT SUPERVISOR
SPECIAL (Specify)			ANNUAL	REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P.				
12. REPORTING PERIOD (From - To) 1 April 66 - 31 Jan 67				
<b>SECTION B</b> PERFORMANCE EVALUATION				
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
<b>SPECIFIC DUTIES</b>				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				
SPECIFIC DUTY NO. 1 Conducts liaison between two contract agents and WH/COG/CICS				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 2 Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3 Prepares translations from Spanish to English and from English to Spanish				RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 4 Prepares material for input for the [redacted] Program				RATING LETTER <b>p</b>
SPECIFIC DUTY NO. 5				RATING LETTER
SPECIFIC DUTY NO. 6				RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>				
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personnel traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p> <p>1 Feb 67</p>				
RATING LETTER <b>P</b>				

SECRET

## NARRATIVE COMMENTS

SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. (Ability of supervisor ruling) given in Section A to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

JAN 30 10 48 AM '67

- Mr. Flores has continued to perform at the same proficient level cited in his previous fitness report. The ratings and remarks appended to this report, accordingly, still remain applicable.

**SECTION D**

**CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

1

卷之三

**MONTHS EMPLOYEE HAS BEEN  
EMPLOYED**

BY SUPERVISOR

5 months

108

全国2016年1月高等教育自学考试

**ORIGIN**

WII/CIG/CIES

Mr. Flores turns in a good picco of finished work and has demonstrated increasing ability as a Case Officer. As soon as he graduates I plan to recommend him for CT training. I have discussed the matter with him and heplans to make a career with the Agency which will be mutually advantageous to him and the Agency.

Digitized by srujanika@gmail.com

100% GENUINE BAGS & 100% AUTHENTIC DESIGNERS

30 Jan 87

Deputy Chief, N.W.C.C.

SECRET

SECRET

(When Filled In)

<b>FITNESS REPORT</b>			EMPLOYEE SERIAL NUMBER 036130
<b>SECTION A</b>			<b>GENERAL</b>
1. NAME (Last) (First) (Middle) <b>FLORES, Daniel</b>			2. DATE OF BIRTH [Redacted]
3. SEX <b>M</b>			4. GRADE S. SD <b>GS-05 D</b>
5. OFFICER/ENLISTED POSITION TITLE <b>Intelligence Analyst.</b>			6. CURRENT STATION <b>DDP/WH/C Washington D.C.</b>
7. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER=PROVISIONAL (See Instructions - Section C)</small> SPECIAL (Specify)			8. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT S. PROPOSED <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT ENCLASSED SPECIAL (Specify)
11. DATE REPORT DUE IN O.P. <b>30 April 1966</b>			12. REPORTING PERIOD (From - To) <b>1 April 65 - 31 March 66</b>
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>			
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>			
<b>SPECIFIC DUTIES</b>			
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>			
SPECIFIC DUTY NO. 1 <b>Conducts liaison between two contract agents and WH/COG/CICS</b>		<small>RATING LETTER</small> <b>P</b>	
SPECIFIC DUTY NO. 2 <b>Maintains files and handles administrative matters for these same two contract agents, including travel, housing, payments, etc.</b>		<small>RATING LETTER</small> <b>P</b>	
SPECIFIC DUTY NO. 3 <b>Prepares translations from Spanish to English and from English to Spanish</b>		<small>RATING LETTER</small> <b>S</b>	
SPECIFIC DUTY NO. 4 <b>Prepares material for input for the [Redacted] Program</b>		<small>RATING LETTER</small> <b>P</b>	
SPECIFIC DUTY NO. 5 [Redacted]		<small>RATING LETTER</small> [Redacted]	
SPECIFIC DUTY NO. 6 [Redacted]		<small>RATING LETTER</small> [Redacted]	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>			
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p> <p style="text-align: center;">P</p>			

## SECRET

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in mind perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel actions. Manner of performance of money ~~and~~ or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If go ~~pp~~ programs needed to complete Section C, attach a separate sheet of paper.

Mr. Flores is a part-time staff employee who works a minimum of nineteen hours per week; he is also a full time college student in his senior year, majoring in political science and specializing in Latin American studies. Subsequent comments should be prefaced by the statement that Mr. Flores' overall performance of his assigned duties would be considerably more efficient if he were able to devote full time to his assignment. On the other hand, Mr. Flores is preparing himself academically for a useful career with the Agency and in the rater's opinion shows promise of becoming a very capable and competent officer.

Mr. Flores is bilingual and has served very efficiently as a translator for the Branch. He has gained very valuable experience as a case officer in the handling of two contract agents of WII/COG/CICS and in doing so has demonstrated tact, sound judgment and a fine ability to handle people. Mr. Flores is very personable, intelligent and makes an excellent appearance. With the completion of his studies he should be able to make the transition from Intelligence Assistant to Junior Case Officer, which the rater heartily recommends.

## SECTION D

## CERTIFICATION AND COMMENTS

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

30 November 1966

*J. A. Castoro*

BY SUPERVISOR

2.

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11 months

DATE

OFFICIAL TITLE OF SUPERVISOR

30 November 66

DC/WII/COG/CICS

TYPED OR PRINTED NAME AND SIGNATURE

*J. A. Castoro*

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Flores has worked closely under my direct supervision in the handling of the two contract employees listed under Specific Duty No. 1 and 2. I concur with the rating of Mr. Castoro and can only emphasize that I believe Mr. Flores will make a good Case Officer and I plan to recommend him for CT status as soon as he is able to be with us full time.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

30 Nov 1966

Chief, WII/COG/CICS

SECRET

## SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
<b>SECTION A</b>				<b>GENERAL</b>	
1. NAME <b>FLORES, Daniel</b>		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
6. OFFICIAL POSITION TITLE <b>Intel Clerk</b>		7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/WH/COG</b>		8. CURRENT STATION <b>WASH. D.C.</b>	
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input checked="" type="checkbox"/> SPECIAL (Specify): SPECIAL (Specify): <b>Recommendation for Promotion</b>		10. CHECK (X) TYPE OF REPORT <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify): SPECIAL (Specify): <b>Recommendation for Promotion</b>		11. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE	
11. DATE REPORT DUE IN O.P. <b>1 February 1967-15 June 1967</b>					
12. REPORTING PERIOD (From To) <b>1 February 1967-15 June 1967</b>					
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>					
<p><b>SPECIFIC DUTY NO. 1</b> <b>Performs intelligence operations support work in connection with Cuban CI operations in [redacted] Assesses lead files, collates data on hand and adds information received in preparation for target analysis.</b> <b>RATING LETTER S</b></p>					
<p><b>SPECIFIC DUTY NO. 2</b> <b>Screens [redacted] for information of value in the branch counter-espionage-counter intelligence records and for operational data.</b> <b>RATING LETTER S</b></p>					
<p><b>SPECIFIC DUTY NO. 3</b> <b>Conducts liaison between two contract agents and WH/COG/CICS and maintains the administrative records for these cases.</b> <b>RATING LETTER P</b></p>					
<p><b>SPECIFIC DUTY NO. 4</b> <b>Prepares translations from Spanish to English and English to Spanish of operational correspondence.</b> <b>RATING LETTER P</b></p>					
<p><b>SPECIFIC DUTY NO. 5</b></p>					
<p><b>SPECIFIC DUTY NO. 6</b></p>					
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					
<b>RATING LETTER S</b>					

## SECRET

(Formerly Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain remarks given in Section B to provide best basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.</p> <p>Mr. Flores is a part-time staff employee who works a maximum of 19½ hours per week while attending university full-time. In August 1967 he will obtain his bachelor's degree in political science. He will revert to full-time employment upon finishing his university studies and will be recommended to the Office of Training for admission in the CT class beginning November 1967.</p> <p>The limitations imposed by part-time employment have prevented us from assigning Mr. Flores to jobs within the branch such as the monitoring of active field cases which require close, daily attention. However, he is qualified for this type of duty. His performance in the duties described above is excellent. He accomplishes his tasks quietly and efficiently with a minimum of guidance from his supervisor. Because he is bi-lingual in Spanish and English he is of great use to the Branch in screening quickly and accurately materials which are of counter-intelligence interest.</p> <p>Mr. Flores agency work background, coupled with his formal education about to be completed and his own desire to make a career in intelligence make him an extremely valuable employee, one in whom the Agency should not hesitate to invest time and money for the advancement of his career training.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1.		BY EMPLOYEE	
		I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE	SIGNATURE OF EMPLOYEE		
July 14, 1967	<i>Ricardo Flores</i>		
2.		BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPE OR PRINTED NAME AND SIGNATURE	
	DC/WH/COG/CICS	<i>C. Trettin</i> Carl Trettin	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I would rate Mr. Flores essentially the same as Mr. Trettin. I wish to stress that, although young and inexperienced in intelligence work at the present time, the potential is certainly there. After CT training Mr. Flores should be a fine, dedicated and competent officer.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL		
C/WH/COG/CICS			

SECRET

**SECRET**  
(When Filled In)

<b>FITNESS REPORT</b>					EMPLOYEE SERIAL NUMBER 036130										
<b>GENERAL</b>															
1. NAME <b>FLORES, Daniel</b>		(Last)      (First)      (Middle)	2. DATE OF BIRTH	3. SEX <b>M</b>	4. GRADE <b>GS-05</b> 5. SD <b>D</b>										
6. OFFICIAL POSITION TITLE <b>Intelligence Asst.</b>		7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/SAS</b>		8. CURRENT STATION <b>Washington D.C.</b>											
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER-PROVISIONAL (See Instructions - Section C)</small> <small>SPECIAL (Specify):</small>			10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <small>SPECIAL (Specify):</small>												
11. DATE REPORT DUE IN O.P. <b>30 April 1965</b>		12. REPORTING PERIOD (From- To) <b>1 January 1964 - 31 March 1965</b>													
<b>PERFORMANCE EVALUATION</b>															
<table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">W - <u>Weak</u></td> <td>Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</td> </tr> <tr> <td>A - <u>Adequate</u></td> <td>Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</td> </tr> <tr> <td>P - <u>Proficient</u></td> <td>Performance is more than satisfactory. Desired results are being produced in a proficient manner.</td> </tr> <tr> <td>S - <u>Strong</u></td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td>O - <u>Outstanding</u></td> <td>Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</td> </tr> </table>						W - <u>Weak</u>	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.	A - <u>Adequate</u>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	P - <u>Proficient</u>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.	S - <u>Strong</u>	Performance is characterized by exceptional proficiency.	O - <u>Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.
W - <u>Weak</u>	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.														
A - <u>Adequate</u>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.														
P - <u>Proficient</u>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.														
S - <u>Strong</u>	Performance is characterized by exceptional proficiency.														
O - <u>Outstanding</u>	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.														
<b>SPECIFIC DUTIES</b>															
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>															
SPECIFIC DUTY NO. 1		Served as interpreter for WH/SA counterintelligence operations officers and Office of Communications officers in training and briefing agents			RATING LETTER <b>S</b>										
SPECIFIC DUTY NO. 2		Assisted in the debriefing of a Cuban intelligence service defector.			RATING LETTER <b>P</b>										
SPECIFIC DUTY NO. 3		Translated and participated in the preparation of agent [redacted] and [redacted]			RATING LETTER <b>P</b>										
SPECIFIC DUTY NO. 4		Performed traces and research relating to counterintelligence operations and activities.			RATING LETTER <b>S</b>										
SPECIFIC DUTY NO. 5					RATING LETTER										
SPECIFIC DUTY NO. 6					RATING LETTER										
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>															
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>															
13 APR 1965					RATING LETTER <b>S</b>										

## SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Flores was a particularly useful and versatile employee in the WH/SA counterintelligence operations unit. Although he had no operational training or previous operational experience, he learned rapidly and performed well the operational support type duties assigned to him. His fluent knowledge of the Spanish language, his willingness to learn and perform tedious tasks, and his conscientious approach to his work were important factors in his performance. His previous assignments in the RI Division and in WH/SA as a translator and in conducting name traces gave him a good background.

With respect to specific duty #3, on two separate operations in [redacted] Mr. Flores participated in the training and preparation of agents for [redacted]. In the first operation he interpreted for training in [redacted] and related subjects. The second operation involved [redacted] only. This experience enable Mr. Flores to perform duties (specific duty #3.) relating to communications with agents [redacted].

Mr. Flores plans to continue his university education and attain a degree. Arrangements have been completed so that he may work in the Agency on a part time basis beginning in January 1965. He will attend classes at a local university as a full time student.

Mr. Flores was promoted from GS-04 to GS-05 on 16 March 1964. He has been performing duties at the GS-06 level, and he should be promoted.

(see page two)

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

6 April 1965

SIGNATURE OF EMPLOYEE

*David Flores*

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

15 months

DATE

6 April 1965

OFFICIAL TITLE OF SUPERVISOR

C/WH/SA/C Ops (WH/C/RR/OS)

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Concur.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

C. WH SA CI (WH C SP)

SECRET

**SECRET**

- 2 -

Mr. Flores is cost conscious and effective in the use of space, equipment and funds.

Mr. Flores does not hold a supervisory position.

**SECRET**

SECRET  
(When Filled In)

FITNESS REPORT			EMPLOYEE SERIAL NUMBER	
SECTION A			GENERAL	
1. NAME (Last) (First) (Middle) <b>FLORES Daniel</b>			2. DATE OF BIRTH	3. SEX
			Male	GS-4 D
4. OFFICIAL POSITION TITLE <b>Translator</b>			5. OFF DIV/DRN OF ASSIGNMENT	6. CURRENT STATION
			DDP/S.A.S.	Washington, D.C.
9. CHECK (X) TYPE OF APPOINTMENT CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			10. CHECK (X) TYPE OF REPORT INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify): <b>Promotion Recommendation</b>	REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE
11. DATE REPORT DUE IN O.P. 10 June 1963 to 6 December 1963			12. REPORTING PERIOD (From - To)	
SECTION B PERFORMANCE EVALUATION				
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
SPECIFIC DUTIES				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).				
SPECIFIC DUTY NO. 1 Translates material from Spanish to English and vice-versa. Translates agent messages.				RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 Performs name traces, analyses, extracts and summarizes obtained information.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3 Prepares and initiates requests for operational clearances.				RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4 Writes and prepares dispatches, cables and memoranda.				RATING LETTER <b>A</b>
SPECIFIC DUTY NO. 5				RATING LETTER
SPECIFIC DUTY NO. 6				RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular strengths or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				
J 0 DEC 1963				RATING LETTER <b>P</b>

## SECRET

(Often Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable. Mr. Flores entered on duty with Special Affairs Staff in June 1963. Due to his proficiency in Spanish he was assigned to translating duties and immediately proved to be an invaluable asset to this office as well as to the Staff as a whole. He worked many late hours and weekends helping to facilitate the flow of translations from this office to the different components within SAS. His performance of these duties can best be characterized as "exceptional" in all degrees.

Mr. Flores expressed a desire to move into a position of greater responsibility and this request was readily granted approximately one month ago. He is currently being trained as an intelligence assistant in Ops Support functions and his performance to date has been excellent. In his new duties Mr. Flores requires very little supervision. This can be attributed in part to his degree of intelligence as well as the background he obtained for his present duties while assigned to his previous job in RID/INDEX. Mr. Flores spent approximately one year in his former job and the knowledge he brought with him relating to name tracing procedures has enabled him to grasp the duties of his new position quite rapidly.

As a means of furthering his education Mr. Flores is attending American University at night. He has expressed a desire to obtain some agency training and would like very much to be enrolled in the Intelligence Orientation Course as soon as possible.

Mr. Flores entered the agency as a GS-4 in March 1962. It is strongly recommended that he be promoted at the earliest possible date to a GS-5.

## SECTION D

## CERTIFICATION AND COMMENTS

1. BY EMPLOYEE	
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE 17 Dec 1963	SIGNATURE OF EMPLOYEE Daniel Flores
2. BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 5 Months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
DATE 17 Dec 1963	OFFICIAL TITLE OF SUPERVISOR CHIEF, SAS/ICS
3. BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL	

I agree with the assessment of the supervisor, concur in his decision to move Mr. Flores into a position of greater responsibility, and I support the recommendation that Mr. Flores be promoted.

Attached is a formal recommendation.

6678

INITIALS OR SIGNATURE OF REVIEWING OFFICIAL

6944-LJ

CHIEF, SAS/INTL

SECRET

**SECRET**  
Non-Fitter Part

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 036130		
<b>SECTION A</b>			<b>GENERAL</b>					
1. NAME <b>FLORE3</b>		(First) <b>Daniel</b> (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	B. SD		
5. OFFICIAL POSITION TITLE <b>File Clerk</b>		7. OFFICER/RR OF ASSIGNMENT <b>OPPER/RID/RD/IN</b>		8. CURRENT STATION <b>Hdqrs.</b>				
9. CHECK (X) TYPE OF APPOINTMENT  <input checked="" type="checkbox"/> CARRIER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY  <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)  <input type="checkbox"/> SPECIAL (Specify):		10. CHECK (X) TYPE OF REPORT  <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		11. REPORTING PERIOD (From To)  <b>13 December 1962 - 31 March 1963</b>				
11. DATE REPORT DUE IN O.P.  <b>20 April 1963</b>								
<b>SECTION B</b> <b>PERFORMANCE EVALUATION</b>								
W - Weak		Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.						
A - Adequate		Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.						
P - Proficient		Performance is more than satisfactory. Desired results are being produced in a proficient manner.						
S - Strong		Performance is characterized by exceptional proficiency.						
O - Outstanding		Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
<b>SPECIFIC DUTIES</b>								
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).								
SPECIFIC DUTY NO. 1		Conducts name traces in the Main Index of the Records Integration Division.						RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2		Fulfils daily and weekly maintenance duties required by all name checkers; e.g., filing, auditing and refiling.						RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3								RATING LETTER
SPECIFIC DUTY NO. 4								RATING LETTER
SPECIFIC DUTY NO. 5								RATING LETTER
SPECIFIC DUTY NO. 6								RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>								RATING LETTER <b>S</b>
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.								RATING LETTER

**SECRET**

(When Filled In)

**SECTION C**

**NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping ~~the~~ ~~Employee's~~ relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

APR 23 4 13 PM '63

During this reporting period, Mr. Flores continued to conduct himself in the exceptionally proficient manner which was noted in ~~the~~ ~~Employee's~~ Fitness Report. He is one of  name tracers who specialize in a particular area, a fact which tends to increase the difficulty as well as the responsibility of name tracing. In spite of this burden, Mr. Flores has consistently maintained an above average level of production and an exceptionally high quality in his finished products.

Mr. Flores is a conscientious and highly motivated employee who evidences a sound sense of responsibility. He has frequently voiced a desire to take advantage of any career opportunities the Agency may offer to him. He is currently enrolled as a full-time student at the American University.

**SECTION D**

**CERTIFICATION AND COMMENTS**

1.

**BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

2.

SIGNATURE OF EMPLOYEE

10 April 1963

*Alvaro Flores*

**BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

10 months

DATE

OFFICIAL TITLE OF SUPERVISOR

TV

3.

**BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPE OR PRINTED NAME AND SIGNATURE

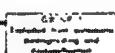
*Chief, RID/Index*

Chief, RID/Index

**SECRET**

SECRET  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 036130			
<b>SECTION A</b>							
1. NAME <b>FLORES, Daniel</b>			GENERAL				
2. DATE OF BIRTH			3. SEX <b>M</b>	4. GRADE <b>GS-4</b>	5. SD <b>D</b>		
6. OFFICIAL POSITION TITLE <b>File Clerk</b>			7. OFF/DIV/BP OF ASSIGNMENT <b>OPSPER/RID/RR</b>				
8. CURRENT STATION <b>Idaho.</b>			9. CHECK (X) TYPE OF APPOINTMENT				
CAREER	RESERVE	TEMPORARY	X	INITIAL	REASSIGNMENT SUPERVISION		
XX CAREER/PROVISIONAL (See Instructions - Section C)				ANNUAL	REASSIGNMENT EMPLOYER		
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P. <b>12 January 1963</b>			12. REPORTING PERIOD (From To) <b>12 March 1962 - 12 December 1962</b>				
<b>SECTION B</b> PERFORMANCE EVALUATION							
W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.						
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.						
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.						
S - Strong	Performance is characterized by exceptional proficiency.						
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.						
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1							RATING LETTER
Performs name traces of personal and impersonal subjects in the RI/Index.							<b>S</b>
SPECIFIC DUTY NO. 2							RATING LETTER
Fulfills daily and weekly requirements of maintenance duties; e.g., filing, purging, auditing, and screening of index cards.							<b>P</b>
SPECIFIC DUTY NO. 3							RATING LETTER
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
							<b>P</b>



## SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

From the outset Mr. Flores has shown many characteristics of an above-average employee. His initial training in the intricacies of his duty assignment was marked by a high degree of application, interest, and achievement. Since that time Mr. Flores has proven himself a conscientious and responsible employee, one whose work record is distinguished by a high calibre of quality and quantity.

Because of his fine record, Mr. Flores was chosen one of the three area specialists for this section. He specializes in the [redacted] area and his work is characterized by exceptional proficiency.

At present Mr. Flores is registered at American University as a sophomore. Inasmuch as he has exhibited both potentiality and strong working habits, I recommend that Mr. Flores be given the Professional Battery Test at the earliest opportunity.

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

3 January 1963

*Daniel Flores*

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN  
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

7 months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYP

3 January 1963

Deputy Chief, RID/IN (E/S)

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I fully concur in the above evaluation.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED	
3 January 1963	Chief, RID/Index		

SECRET:

**SECRET**  
*(When Filled In)*

## **TRAINING EVALUATION--CLERICAL INDUCTION**

TRAINING EVALUATION--CLERICAL INDUCTION

SECTION I

IDENTIFYING INFORMATION

NAME OF STUDENT

FLORES, Daniel

SEX

M

DATES OF ATTENDANCE

12-23 March 1962

PART

DATE OF BIRTH

POD DATE

12 March 1962

TITLE AND GRADE

File Clerk GS-4

SECTION II

CHARACTERISTICS OF THE COURSE

Each course subject is taught daily for a 5-day period. Students who do not meet Agency standards in shorthand or typewriting within this 5-day period receive further instruction in an attempt to meet the established qualification. The second week of geography instruction is given to students who have not been assigned to their positions. It is possible that not all students will be assigned to every course subject.

SECTION III

OBJECTIVES

To meet the typewriting criterion based on the scale on the reverse of this page. (For qualification, students must meet this requirement once.)

To take dictation at 60 words a minute for 3 minutes and to transcribe with 3 or fewer errors in not more than 20 minutes. (For qualification, students must meet this requirement once.)

To recognize errors in grammar and in punctuation and capitalization.

To study the politics and the geography of countries of Europe and Asia. (These continents are covered in alternate weeks.)

To receive instruction in typing of reproduction masters, making erasures, caring for the typewriter, and utilizing typing shortcuts.

To become familiar with the system of filing as outlined in the Agency's "Handbook for Subject Filing."

SECTION IV

QUALIFICATION IN SKILLS

COURSE PERFORMANCE

QUALIFICATION

QUALIFIED

IN COURSE

AT END

NOT  
QUALIFIED

TYPEWRITING

SPM

WPM

EDGES

15

NET

22

SECTION V

RATINGS

Agency samplings of students' ratings indicate the percentage distribution as noted below. This trainee's rating is marked by the asterisk.

SUBJECT

POOR

FAIR

SATISFACTORY

EXCELLENT

GRAMMAR

6%

16%\*

51%

27%

PUNCTUATION AND CAPITALIZATION

20%\*

27%

41%

12%

EXCELLENT -- thorough knowledge of material presented and above-average performance in meeting course goals.

SATISFACTORY -- average knowledge of material presented and adequate performance in meeting course goals.

FAIR -- -- -- borderline knowledge of material presented and limited performance in meeting course goals.

POOR -- -- -- inadequate knowledge of material presented and unsatisfactory performance in meeting course goals.

SECTION VI

FAMILIARIZATION LECTURES

GEOGRAPHY OF EUROPE

GEOGRAPHY OF ASIA

AGENCY FILING SYSTEM

OFFICE PRACTICE

SECTION VII

COMMENTS

This student was assigned to the class in typewriting at his own request. Because it is not necessary for an individual whose job title is File Clerk to meet Agency standards in typewriting, he was released from training when his final processing was completed.

CONTINUE COMMENTS ON REVERSE SIDE

OVER

SIGNATURE OF CHIEF, CLERICAL INDUCTION TRAINING

FOR THE DIRECTOR OF TRAINING:

This student was assigned to the class in typewriting at his own request. Because it is not necessary for an individual whose job title is File Clerk to meet Agency standards in typewriting, he was released from training when his final processing was completed.

CONTINUE COMMENCE ON PREVIOUS SIDE  YES

**SIGNATURE OF CHIEF, CLINICAL INSTRUCTION TRAINING**

FOR THE DIRECTOR OF TRAINING:

**SECRET**  
*(When Filled In)*

GROSS WORDS	ERRORS	NET WORDS	GROSS WORDS	ERRORS	NET WORDS
45	5	40	63	14	49
46	6	40	64	14	50
47	6	41	65	15	50
48	7	41	66	15	51
49	7	42	67	16	51
50	7	43	68	16	52
51	8	43	69	16	53
52	9	43	70	16	54
53	9	44	71	17	54
54	9	45	72	18	54
55	10	45	73	18	55
56	10	46	74	19	55
57	10	47	75	19	56
58	10	48	76	20	56
59	11	48	77	20	57
60	12	48	78	20	58
61	12	49	79	21	58
62	13	49	80	21	59

This scale conforms to that used by the Civil Service Commission. The number of errors indicated after the gross is the maximum permissible for that specific number of gross words typed; i.e., an individual who types 60 words per minute would be allowed no more than 12 errors in a 10-minute typewriting test.

**SECRET**

**SECRET**  
*(When Filled In)*

**REPORT OF TEST RESULTS (CLERICAL SKILLS)**

NAME FLORES, Daniel (WMI)	TITLE AND GRADE File Clerk GS-4	DATE OF BIRTH
DATE 14 March 1962	PERSONNEL OFFICER - IAS	

AGENCY STANDARDS

**TYPEWRITING** The typewriting criterion is based on the scale on the reverse of this page.

**SHORTHAND** Dictation at 80 words a minute for three minutes and the transcription of the dictated material with five or fewer errors in not more than twenty minutes.

EXAMINEE'S RATINGS

TYPEWRITING: WAM 43 Errors 14 Net 29 Qualified: Yes        No   X  

SHORTHAND: WAM        Errors        Qualified: Yes        No       

REMARKS: Training in typewriting recommended if he so desires. It is not necessary for his job title.

                          
CHIEF, CLERICAL INDUCTION TRAINING

**SECRET**

**CONFIDENTIAL**

Open Pallet Box

THIS INFORMATION IS FOR AUTHORIZED PERSONS ONLY TEST SCORES ARE NOT TO BE REVEALED TO EXAMINER.

OFFICE OF TRAINING, ASSESSMENT AND EVALUATION STAFF EVALUATION OF TEST RESULTS (CLERICAL)		DATE								
NAME	GRADE AND POSITION	PERSONNEL OFFICER								
FIGUEROA, Daniel (D.F.)	GS-1, FILE CLERK	TAG								
<p>TEST RESULTS ARE AN INTEGRAL PART OF THE FACT FINDING PHASE OF MOST PERSONNEL OPERATIONS. EVALUATION OF THESE MEASUREMENTS IN RELATION TO OTHER FACTUAL MATERIAL IN THE PERSONNEL RECORD PROVIDES ONE OF THE BASES FOR THE SELECTION AND PLACEMENT OF APPLICANTS AND FOR COUNSELING WITH NEW EMPLOYEES. HOWEVER, THE DECISION AS TO WHETHER AN INDIVIDUAL CAN AND WILL PERFORM THE DUTIES OF A SPECIFIC JOB MUST REST ON THE JUDGMENT OF THE RECRUITER OR PLACEMENT OFFICER. BMO CONSIDERS ALL ASPECTS OF THE INDIVIDUAL'S ABILITY, BACKGROUND, AND PERSONALITY IN RELATION TO THE REQUIREMENTS OF THE AGENCY.</p>										
<p>THIS REPORT EVALUATES THE SUBJECT'S PERFORMANCE BY COMPARING HIS SCORES WITH THOSE OF A NATIONWIDE GROUP OF TWELFTH GRADE STUDENTS OF THE SAME SEX. SPECIFIC APTITUDES ARE IDENTIFIED BY USING A VARIETY OF TESTS RANGING FROM WORK SAMPLES OF FILING AND CHECKING TO MEASURES OF REASONING ABILITY. IN EVALUATING THESE TEST SCORES FOUR GENERAL CONCEPTS SHOULD BE KEPT IN MIND: (1) TESTS ARE MORE EFFECTIVE IN SCREENING OUT POTENTIAL FAILURES THAN IN IDENTIFYING THOSE WHO WILL PERFORM SUCCESSFULLY. (2) PERSONS WHOSE SCORES ARE PREDOMINANTLY IN THE LOWEST 165 ORDINARILY ARE NOT SUITED FOR OFFICE WORK. (3) MOST JOBS DO NOT REQUIRE HIGH SCORES ON ALL TESTS, BUT HAVE A RANGE WITHIN WHICH PEOPLE CAN DO THE WORK EFFECTIVELY AND TEND TO REMAIN ON THE JOB. (4) EFFICIENCY IN PLACEMENT NECESSITATES MATCHING THE JOB AND THE INDIVIDUAL; BOTH THOSE WHO ARE OVERQUALIFIED AND THOSE WHO ARE UNDERQUALIFIED ARE LIKELY TO QUIT.</p>										
<p>A DESCRIPTION OF THE SIX TESTS IN THE BATTERY IS GIVEN ON THE BACK OF THIS FORM. IN CASES WHERE THE PATTERN OF THE TEST SCORES APPEARS TO INDICATE APTITUDE IN PARTICULAR AREAS THIS WILL BE NOTED IN THE REMARKS SECTION. WHERE RESEARCH STUDIES HAVE BEEN CONDUCTED ON THE RELATIONSHIP OF THE TESTS TO JOB PERFORMANCE THESE COMMENTS WILL RELATE TO SPECIFIC JOBS. THIS SECTION MAY ALSO INCLUDE A BRIEF ANALYSIS OF THE INDIVIDUAL'S POTENTIAL IN RELATION TO HIS INTERESTS AND BACKGROUND.</p>										
<p>CONSULTATION OR FURTHER INFORMATION REGARDING INTERPRETATION OF TEST SCORES IS AVAILABLE BY CALLING EXTENSION 8017.</p>										
NAME OF TEST	VERY LOW		LOW		AVERAGE		HIGH		VERY HIGH	
	20	30	60	135	100	120	135	95	95	25
CLERICAL SPEED AND ACCURACY									<input checked="" type="checkbox"/>	
SPELLING									<input checked="" type="checkbox"/>	
SENTENCES					<input checked="" type="checkbox"/>					
NUMERICAL ABILITY			<input type="checkbox"/>			<input checked="" type="checkbox"/>				
ABSTRACT REASONING						<input checked="" type="checkbox"/>				
VERBAL REASONING					<input checked="" type="checkbox"/>					
<p>REMARKS:</p> <p>Mr. Figueroa should be referred for PATH, preferably while he is still in the I.S.</p>										

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED BY SOURCE

at 2070 .....

CONFIDENTIAL

三七

CONFIDENTIAL Form Filled In

A-1A

CERTIFICATION OF LANGUAGE PROFICIENCY IN <u>Spanish A</u>				DATE PREPARED	4-1-80
SON	NAME (Last-First-Middle)	DATE OF BIRTH	GRADE	DIVISION	
4161042612310	Florres, Daniel	UNDERCOVER <input type="checkbox"/>	YEAR MONTH DAY	13	LA
TYPE GRADE / LANG CODE	READING*	SPEAKING*	UNDERSTANDING*	DATE TESTED	TYPE TEST
C RL.18	+	5	5	80 3 20	N

\*SEE BACK FOR PROFICIENCY LEVEL DEFINITIONS

REMARKS  
Outside Test.

**CERQUAL SYSTEM**  
Updated  
APR 4 1980  
By.....

CHIEF OF TESTING/LB  
TEST NUMBER  
**42001**

FORM 1273 OBSOLETE PREVIOUS  
10-79 EDITIONS

CONFIDENTIAL

REV 42 YRS FR DATE PREPARED  
JUN 1982 BY 011984

(10-48)  
PART I - INFO SYS. BR.

SECRET

## FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE <b>Daniel Flores</b>	DATE RECEIVED AT HEADQUARTERS <b>5 June 1979</b>	DATE RECEIVED BY CENTER SERVICE <b>22 May 79</b>	NAME OF SUPERVISOR <b>Lawrence Sternfield</b>	DATE OF APPROVAL <b>22 May 79</b>
DATE OF BIRTH [Redacted]	SERVICE DIVISION <b>DQG</b>	CURRENT POSITION AND GRADE <b>Ops Officer, GS-13</b>	STATION OR RATE [Redacted]	CURRENT COVER [Redacted]
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF PCS ARRIVAL <b>February 1978</b>	2. REQUESTED DATES OF DEPARTURE <b>Operations Officer GS-13</b>	3. EXPECTED DATE OF FIRST CONCERTIN BY HQ <b>SEE 6A</b>	4. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE <b>SEE 6A</b>	
5. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU				
Spouse - 43 Daughter - 5				
6. PERSONAL SITUATION FACTORS THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT				
Child's schooling				
7. LIST YOUR MAJOR DUTIES DURING CURRENT PCS (See special note on transmittal form).				
Liaison Officer in charge of an [Redacted] man unit.				
<small>* TRAINING DESIRED INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS</small>				
Training in a third language. Additional management training offered either by the Agency or by a private institution. Consideration for an appointment to a War College.				

SECRET

SECRET

As noted in #8 below, my first choice for my next assignment is that of Chief of Base in [redacted] or Chief of Base in Latin America. I have served three tour's overseas and a four-year tour at Headquarters in Cuban Operations. In the past ten years I have gained experience in technical operation, operations related to the priority and hard targets and, prior to my assignment to [redacted] as supervisor of one of the [redacted] branches in Cuban Operations. In [redacted] my responsibilities consist of the supervision and administration of an [redacted] man unit composed of [redacted] nationals which I manage and direct operationally in coordination with the Government of [redacted]. I have been in [redacted] fifteen months.

Should the Chief of Base position in [redacted] become available in the summer of 1980 or 1981 and this job is offered to me, I would be

10. INDICATE IF YOU SEE ANY PREFERENCE FOR CERTAIN POSITION TO BE ASSIGNED IN ADDITION AND ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT OR EXTENSION OF THIS TOUR. INDICATE WHETHER YOU ARE PREPARED TO BE REMOVED FROM YOUR CURRENT STATION IN FAVOR OF ANOTHER STATION. INDICATE ALL ALTERNATIVE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR. PLEASE SEE GA

EXTING TOUR 4-16 MONTHS AT CURRENT STATION & depending on next assignment  
(check)

BE ASSIGNED TO 1st CHIEF [redacted] COLLEGE 1st CHIEF Management THE OFFICE Headquarters TOUR  
 BE ASSIGNED TO ANOTHER FIELD STATION INDICATE PROGRAM, COMMANDING AREA OR SPECIALIZATION  
1st CHIEF [redacted] 2nd choice COB Latin Am 3rd choice Washington, D.C.  
 RETURN TO MY CURRENT STATION

PREPARE UPDATING OF PERSONAL SECURITY INFORMATION IN ACCORDANCE WITH DOI-F 240-8 AND FORWARD UNDER SEPARATE COVER. INDICATE DATE FORWARDED OR TO BE FORWARDED.

TO BE COMPLETED BY FIELD STATION

11. IN CONSIDERATION OF YOUR EXPERIENCE AND PERFORMANCE IN THE FIELD, INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT. INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND PAYLEVEL.

Based upon Subject's experience both prior to and during his current tour, his requests for assignment as stated by him are very reasonable. I fully endorse his requests.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

12. IN CONSIDERATION OF YOUR EXPERIENCE AND PERFORMANCE IN THE FIELD, INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT. INDICATE STAFFING REQUIREMENTS OF YOUR COMPONENT. INDICATE YOUR PAYLEVEL'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND PAYLEVEL.

DATE

1979

SIGNATURE

FOR USE BY CAREER SERVICE

13. APPROVED ASSIGNMENT

14. EMPLOYEE NUMBER 1979 PAYLEVEL

CODE NO.

PAYLEVEL

CAREER SERVICE REPRESENTATIVE

SECRET

S E C R E T

vA Continued. . .

amenable to an extension in [ ] for a period of 12 to 16 months depending on the timing of the assignment. If I were to be assigned to a country where an additional language is needed, time for language training should be taken into consideration.

In the event that a position as Chief of Base does not become available within the next year or two, my second choice is to be considered for a War College either for calendar year 1980 or 1981. This would enable me to more fully participate in the Agency's rotational program and would provide me with a higher level of training needed for career mobility in the Agency.

My third choice is to be considered as a candidate for the agency's management program at one of the participating Universities in the United States with the intention of accepting a field assignment immediately after the termination of this training. I am prepared to make all the necessary arrangements toward this end (i.e., applying for admission, etc.) provided a list of Universities is furnished to me.

As noted above, I am willing to remain in [ ] through the summer of 1981 if my first choice is approved. In the event that my first choice cannot be granted I would be available to return to the United States in the summer of 1980 to prepare for my second or third choice. Should my second or third choice not be granted, I would prefer to return to the United States for an assignment in Washington.

S E C R E T

ADMINISTRATIVE  
Internal Use Only

C 10

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 036130	(Print) Flores	7-8 Daniel	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ONE ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO GFT NO. 58, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	28-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39	40-42
0	2	1	5	7	8	1			4 5 0

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	28-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	40-42

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

TRAVEL VOUCHER		DISPATCH
CABLE		DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)		

DOCUMENT IDENTIFICATION NO. **IN 0326885** DOCUMENT DATE-PERIOD **2/15/78**

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO		
1. D. DIVISION, CTOR.	DATE	SIGNATURE
X 1. A. DIVISION	2/23/78	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

100-14518-111-1001

ADMINISTRATIVE-Internal Use Only

16-101

*Leavenworth*  
*by 16 Jan*

CONFIDENTIAL  
*(When Filled In)*

NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

DANIEL FLORES  
(NAME  
(Please Print))

  
SIGNATURE

FORM 3661

CONFIDENTIAL

Jan 30, 1978  
(DATE)

E2, IMPDET CL BY 007622

CONFIDENTIAL  
*(When Filled In)*

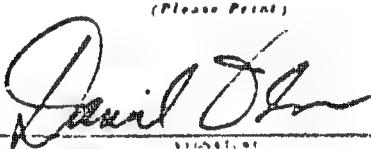
NOTE TO OUTGOING PCS TRAVELERS

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 9 July 1970.

Daniel Flores  
(NAME  
(Please Print))

  
SIGNATURE

FORM 3661

CONFIDENTIAL

14 Nov. 1977  
(DATE)

E2, IMPDET CL BY 007622

SECRET

(Type or Print)

## SERVICE ABROAD AGREEMENT

### I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETAIN YOU, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONTEMPLATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE

Daniel Flores

SD

D

### II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS XX

C. NONSTANDARD TOUR OF DUTY OF \_\_\_\_\_ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT. (See HR 20-30)

REQUESTED (Initials after name)

OPERATING OFFICIAL

CONCUR

CHIEF SERVICE DIRECTOR OF PERSONNEL

B. NONSTANDARD TOUR OF DUTY OF \_\_\_\_\_ MONTHS PREVIOUSLY APPROVED PER HR 20-10.

OPERATING OFFICIAL

J. R. Flores  
J. R. Flores CIA/PERS

APPROVED

DIRECTOR OF PERSONNEL

### III. PERMANENT PLACE OF RESIDENCE

3. YOUR PERMANENT PLACE OF RESIDENCE IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES WILL BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. THE RESIDENCE DATA WILL BE KEPT IN YOUR OPERATIONAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 3 ON THE SERVICE AGREEMENT, YOU MUST INDICATE THE PLACE WHERE YOU PREVIOUSLY RESIDED, WHICH LASTED AT LEAST ONE YEAR, OR THE COMMUNALITY IN WHICH YOU LIVED AT THE TIME OF YOUR PREVIOUS RESIDENCE. IF YOU DON'T KNOW THE ADDRESS OF THE RESIDENCE AT ANOTHER PLACE, AT THAT PARTICULAR PLACE OF RESIDENCE, YOU CAN INDICATE AS THE PLACE OF RESIDENCE PLACE, CITY AND STATE AND THAT'S ENOUGH. IF YOU DON'T KNOW THE ADDRESS OF THE PLACE WHERE YOU LIVED AS A POST, AT THE TIME OF YOUR PREVIOUS RESIDENCE, YOU CAN INDICATE AS THE PLACE OF RESIDENCE PLACE, CITY AND STATE. PLEASE SIGNATURE AS EVIDENCE INDICATING THAT YOU ARE SUBMITTED TO THESE CONDITIONS. PLEASE SIGNATURE AS EVIDENCE INDICATING THAT YOU HAVE BEEN READ.

TYPE 3154 (11-64)

SECRET

10. APPROVED BY DIRECTOR

DATE: 10-10-64

**SECRET**

(When Filled In)

5. PHYSICAL DWELLING PLACE (Permanent Place of Residence unless address in item 6 is approved in lieu thereof)

FULL ADDRESS

VIENNA, VIRGINIA 22180

6. OTHER PLACE REQUESTED (Requested Permanent Place of Residence if different from item 5)

FULL ADDRESS

CONCUR

DEPUTY DIRECTOR

DATE

APPROVED

DATE

1/9/78

APPROVED

DIRECTOR OF PERSONNEL

DATE

IV. HOME LEAVE POINT

7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.

8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF MR 20-3CB(3)(C). THE REQUEST MUST BE ACCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.

9. DESIGNATION PER ITEM 7 ABOVE

FULL ADDRESS

PORTLAND, OREGON

10. DESIGNATION PER ITEM 8 ABOVE

FULL ADDRESS

CONCUR

DEPUTY DIRECTOR

DATE

RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT

IN-LAWS

APPROVED

DATE

1/9/78

APPROVED

DIRECTOR OF PERSONNEL

DATE

EMPLOYEE CERTIFICATION

I have read and understand my service obligations and travel entitlements contained in this agreement.



 1/9/78

SECRET

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 036130	(Print) FLORES	7-84 DANIEL	

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 38, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA		O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	2 - CORRECTION	3 - CANCELLATION		
28-28	27-28	28-30	31-31	32-34	35-36					

**TDY DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA		O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	3 - CORRECTION	4 - CANCELLATION		
28-28	27-28	28-30	31-31	32-34	35-36					

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

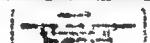
<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
<input type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. AA 10-72 DOCUMENT DATE/PERIOD 3/8-3/11/77

REMARKS

PREPARED BY <u>100</u>	REPORT SUBMITTED BY <u>100</u> SPECIALIST	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED <u>100</u>
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



ADMINISTRATIVE  
Internal Use Only

## REPORT OF SERVICE ABROAD

To: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

140

an offshoot of the

441891

036138

## FLORES

DANIEL

LINE 2 SUBJECT NAME

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ONE ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF N2, SEC. 26, REVISED.

**PCS DATES OF SERVICE**

**TRY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR					CODE	
28-29	27-28	29-30	31-32	33-34	35-36	2 - TOV (Basic)	4 - CORRECTION	6 - CANCELLATION	3B 3D	40-42	
C204	77	C206	77						2	WESTERN HEMISPHERE	

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

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LA 10-77

981 MILETT DATE 11/1988

2/2 - 2/6/22

• 100% 纯天然植物萃取精华

PREPARED BY	REPORT SUBMITTED BY COMPTON POLICE DEPARTMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
PCP SFC Sgt. D. M. STROHBECK, ACPD	DATE 4/16/77	SEARCHED INDEXED SERIALIZED FILED

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

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Internal Use Only

REPORT OF SERVICE ABROAD

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-8 0360130	(Print) FLORES	7-24 DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38	39
						2 - CORRECTION			40-42
						3 - CANCELLATION			

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	38	39
						3 - CORRECTION			40-42
						4 - CANCELLATION			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS, DR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 4/12-4/15/77  
REMARKS

PREPARED BY	REPORT SUBMITTED ON <input checked="" type="checkbox"/> CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<input checked="" type="checkbox"/> O&I DIVISION, CTRB.	DATE <u>7/14/77</u>	SIGNATURE
<input checked="" type="checkbox"/> O&I DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

100-14510-1000000

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10-103

## CONFIDENTIAL

(This form is to be filled in)

## RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HDP 20-7 PERSONNEL EMERGENCY AND LOCATOR REPORTS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

## GENERAL

NAME OF EMPLOYEE (First)	(First)	(Middle)
Flores		Daniel

1. MARITAL STATUS (Check one)	
SINGLE	<input checked="" type="checkbox"/> MARRIED
IF MARRIED, PLACE OF MARRIAGE	
Lima, Peru	
IF DIVORCED, PLACE OF DIVORCE DECREE	
N/A	
DATE OF MARRIAGE	
18 Nov 1960	
DATE OF DECREE	

2. MEMBERS OF FAMILY		
NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.
	Vienna, Va. 22180	573-0797
NAME OF CHILDREN	ADDRESS	SEX DATE OF BIRTH
		Vienna, Va. 22180 F
NAME OF PARENT (or male guardian)	ADDRESS	TELEPHONE NO.
	Gonzales, Texas 78629	512-672-6061

NAME OF MOTHER, INCLUDING MATURE NAME (or female guardian)	ADDRESS	TELEPHONE NO.
N/A		

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED TO AN EMERGENCY.

None

3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 50% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HR 22-195). SPECIFY NAMES AND RELATIONSHIPS.

NAME	DATE OF BIRTH	RELATIONSHIP
N/A		

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY		
NAME (First, Middle)	(Last-First-Middle)	RELATIONSHIP
Mr.		Brother-in-law
HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE		
Seguin, Texas 78155		
HOME TELEPHONE NUMBER		
512-379-1087		

BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE (BUSINESS TELEPHONE & EXTENSION)

Seguin School District

IS THE INDIVIDUAL NAMED ABOVE A DUTY OFFICER OR YOUR AGENCY AFFILIATION? (If "NO" give name and address of organization he believes you work for.)

YES	
NO	X

IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "NO" give name and address of person, if any, who can make such decisions in case of emergency.)

Vienna, Va. 22180

YES	
NO	X

DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESS? (If answer is "NO" explain why on line 8.)

The persons named in items 2 or 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.

## CONFIDENTIAL

(Form Filled In)

5.

## VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

Riggs National Bank Joint account: Daniel and/or [redacted]  
Flores

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?  YES  NO

IF YES, DO YOU HAVE A JOINT ACCOUNT?  YES  NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. (If "Yes", where is document located?)

At home. Now is being prepared.

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  YES  NO. (If "Yes", give name(s) and address) Mr. and Mrs. [redacted]

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. (If "Yes", who possess the power of attorney?)

6.

## ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

7.

RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY  
(No Approval Required)

RESIDENCE WHEN EMPLOYED (Full Address)

PERMANENT PLACE OF RESIDENCE AS DEFINED IN HR 22-3  
(Full Address)

8.

CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 22-3)  
(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)

FULL ADDRESS

DEPUTY DIRECTOR OR DESIGNATE

DATE

DIRECTOR OF PERSONNEL (When Applicable)  
Cable PPF HR 22-3

DATE

SIGNED AT:

DATE

SIGNATURE



CONFIDENTIAL

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	LAST (Print)	FIRST 7-24	NAME MIDDLE
1-6 <b>026130</b>	<b>AOKL3</b>	<b>DANIEL</b>	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (OMP only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58 REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37	38 39	40-42
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION				
						9 - CANCELLATION				

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	37	38 39	40-42
25-26	27-28	29-30	31-32	33-34	35-36	4 - CORRECTION				
12	14	77	12	15	77	6 - CANCELLATION				

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
-----------------------------	----------------------

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED		
X NPA				
X C B L DIVISION, CTB&C	DATE 2/1/78	SIGNATURE		
C B T DIVISION				

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE  
Internal Use Only

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST (Print)	FIRST	MIDDLE
1-8 <b>026130</b>	<b>FLORIS</b>	<b>DANIEL</b>	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 98, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

**TDY DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
01	16	78	01	19	78	2		WESTERN H.	811

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

TRAVEL VOUCHER	DISPATCH		
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT		
OTHER (Specify)			
DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD		
REMARKS			
PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	
SCC <input checked="" type="checkbox"/> C & L DIVISION, CTB&I <input type="checkbox"/> C & T DIVISION	DATE 8/6/78	SIGNATURE	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

**To:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	LAST (Print)	FIRST	NAME
1-6	026130	7-24	DANIEL FLORES

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ONE ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 58, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	37 38 39	40-42	
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION	37			
						5 - CANCELLATION	38			
							39			

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA		O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	37 38 39	40-42	
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION	37			
						5 - CANCELLATION	38			
							39			

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
REMARKS	

PREPARED BY	REPORT SUBMITTED TO CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
DCO		
<input checked="" type="checkbox"/> C & L DIVISION CIVR. <input checked="" type="checkbox"/> C & T DIVISION	DATE 1/23/78	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST <i>(Print)</i>	FIRST <i>Elmer</i>	MIDDLE <i>Daniel</i>
1-6 <i>026130</i>			

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39	
									40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 3 - CORRECTION 4 - CANCELLATION	37	38 39	
									40-42
<i>101777</i>	<i>1020077</i>						<i>2</i>		<i>120</i>

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
CABLE	DUV STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	
DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
<i>16 APR 77</i>	

REMARKS

PREPARED BY	REPORT SUBMITTED BY CONTROLS SPECIALIST	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
<i>16 APR 77</i>	<i>16 APR 77</i>	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

## CONFIDENTIAL

SE TRAINING REPORT		SOVIET/EAST EUROPEAN OPERATIONS COURSE		
STUDENT Flores, Daniel		YEAR OF BIRTH <input type="text"/>	GRADE GS-12	
EDO DATE March 1962	OFFICE LA	SERVICE DESIGNATION D	COURSE DATES 7 - 15 November 1977	
COURSE OBJECTIVES To orient the student on the special nature of the Directorate of Operation's Soviet/East European target and to examine the application of clandestine methods for collecting information on assessing and preparing recruitment operations against Soviet/East European personalities.				
ACHIEVEMENT RECORD This is a certificate of attendance. No evaluation is made of individual performance in the course.				
 SE Training Officer				

GPO 3687 COMPLETE PREVIOUS EDITIONS

CONFIDENTIAL

E-2, IMPDET CL. BY. 059524 104-451

CONFIDENTIAL

OFFICE OF TECHNICAL SERVICES  
BEHAVIORAL ACTIVITIES BRANCH

1. This certifies that Daniel Flores - LA has completed five days of training in the course,                   

2. Primary goals of the course are to familiarize Agency case officers with                   

3. This is a certificate of attendance only. Student achievement was not evaluated.

OTS/Training Branch

E2 IMPDET CL BY 019432

CONFIDENTIAL

S-E-C-R-E-T

TRAINING REPORT/CERTIFICATION OF HANDGUN QUALIFICATION

TITLE: Countering Terrorist Tactics Course No. 16-77 DATES: 19-23 September 1977

STUDENT: FIDIGI, Daniel OFFICE: IA SD: D

PURPOSE AND SCOPE OF COURSE:

(S) This course stressed countermeasures to thwart terrorist acts against U.S. personnel abroad.

PERFORMANCE RECORD:

(U/AIIO) This is to certify that the student has satisfactorily completed the prescribed course of instruction.

HANDGUN QUALIFICATION:

(C) Student completed 24 hours of instruction on handguns at the                   
                 on 23 September 1977; subsequently fired the Handgun Qualification test achieving a score of:

Revolver (Cal. - .38) 289

Automatic (Cal. - 9mm) 255

\_\_\_\_\_ out of a possible 300.

(U/AIIO) The student demonstrated satisfactory application of safety procedures; mechanical aptitude; marksmanship techniques; and maintenance during range firing/classroom sessions; and is qualified to use the handguns (or similar guns) listed above.

FOR THE DIRECTOR OF TRAINING:

                  
Chief, Special Activities Branch/OTD  
                

9/26/77  
Date

S-E-C-R-E-T

E2 IMPDET  
CL by 056382

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL #	LAST 1-6 C-124	FIRST (PRINT) Jules Basel	NAME MIDDLE
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INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ONE DATA). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58, REvised.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38-39	40-42
						2 - CORRECTION			
						3 - CANCELLATION			

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	38-39	40-42
						3 - CORRECTION			
						4 - CANCELLATION			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

✓ TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. E.O. 6417-2	DOCUMENT DATE/PERIOD 1. June 1976 - 15. Sept 1977
--	--

REMARKS

PREPARED BY DPO	REPORT SUBSTANTIATED BY CONTROLLING ELEMENT DATE 15-1-77	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED SIGNATURE J. L. Basel
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE**  
**Internal Use Only**

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	LAST (Print)	FIRST (Initials)	NAME	MIDDLE
1-6 136130				

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (O/P ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 58, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
20-20	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		40-42

**TDY DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	CODE
MONTH	DAY	YEAR	MONTH	DAY	YEAR				
20-20	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		40-42
1 1 1 9 7 7 0 1 2 2 7 7						2		W/11	1 1 1

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH	
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT	
OTHER (Specify)		
DOCUMENT IDENTIFICATION NO. 611-10-77	DOCUMENT DATE/PERIOD 1 Oct 76 to 31 Sept 77	
REMARKS		
PREPARED BY O&C	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
O & C DIVISION, CTSB.	DATE 21. 9. 77	SIGNATURE 611-10-77
O & C DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	LAST  (Print)	FIRST	NAME MIDDLE
110	FLORES	7-28	DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 38, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38 39	
									40-42

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	
									40-42

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

for  
Japet  
5467

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. AA 10-77 DOCUMENT DATE/PERIOD 2/9 - 2/18/77

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
BCO	DATE	SIGN
X C. J. L. DIVISION, CTB&R.	3/25/77	
C. O. T. DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
1-6 036130	177-28 FLORES	7-28 DANIEL	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		
022277	0222577					2			120

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/>	TRAVEL VOUCHER	<input type="checkbox"/>	DISPATCH
	CABLE	<input type="checkbox"/>	DUTY STATUS OR TIME AND ATTENDANCE REPORT
	OTHER (Specify)		

DOCUMENT IDENTIFICATION NO. LA 10-77 DOCUMENT DATE/PERIOD 2/22-2/25/77

REMARKS

PREPARED BY	REPORT SUGGESTED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	
		<input type="checkbox"/> DCB	<input type="checkbox"/> SIGNATURE
<input checked="" type="checkbox"/> C & L DIVISION, CTBQ	DATE <u>3/25/77</u>		
<input checked="" type="checkbox"/> C & T DIVISION			

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
11-6 (Print)	7-24 036130 FLGRES DANIEL		

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (O/P ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 38, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37	38-39	40-42

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38-39	40-42

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
<input type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
<input type="checkbox"/> OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
LAH 10-77	3/3-3/5/77

BEMARKS

PREPARED BY	REPORT SUBMITTED BY	ABOVE DATA CERTIFIED CORRECT - BASED UPON SOURCE DOCUMENT LISTED
<input checked="" type="checkbox"/> O/S BUREAU OF PERSONNEL	DATE	3/25/77
<input type="checkbox"/> O/P DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

## CONFIDENTIAL

(Formerly EDITION 101)

## RESIDENCE AND DEPENDENCY REPORT

AN ORIGINAL OF THIS FORM WILL BE EXECUTED BY EACH EMPLOYEE AT THE TIME OF HIS APPOINTMENT AND WHEN A CHANGE OCCURS IN THE INFORMATION SHOWN BELOW. ITEMS OF CHANGE MAY BE REPORTED IN THE APPROPRIATE BLOCKS WITHOUT COMPLETING THE REMAINDER OF THE FORM EXCEPT THE EMPLOYEE'S SIGNATURE AND DATE. WHEN EXECUTING ITEM 4 ALSO COMPLY WITH HQD 20-7, PERSONNEL EMERGENCY AND LOCATOR RECORDS. THIS FORM WILL BE COMPLETED ONLY BY HEADQUARTERS PERSONNEL AND NOT SENT TO THE FIELD. FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

## GENERAL

NAME OF EMPLOYEE (Last)	(First)	Middle
Flores		Daniel

MARITAL STATUS (Check one)					
SINGLE	<input checked="" type="checkbox"/>	MARRIED	<input type="checkbox"/>	SEPARATED	<input type="checkbox"/>
IF MARRIED, PLACE OF MARRIAGE			DATE OF MARRIAGE		
Lima, Peru			18 NOV 1960		
IF DIVORCED, PLACE OF DIVORCE DECREE					
DATE OF DECREE					

MEMBERS OF FAMILY					
NAME OF SPOUSE	ADDRESS (No. Street, City, State, Zip Code)	TELEPHONE NO.			
	Vienna, Va.	573-0797			
NAME OF CHILDREN	ADDRESS	SEX	DATE OF BIRTH		
	22180 (Same as above)	F			
NAME OF FATHER (or male guardian)	ADDRESS	TELEPHONE NO.			
NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian)	ADDRESS	TELEPHONE NO.			

WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IN CONTACT IS REQUIRED IN AN EMERGENCY.

Mr. [REDACTED]	- Brother-in-law
3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 50% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (HQD 20-52). SPECIFY NAMES AND RELATIONSHIPS.	
NAME	DATE OF BIRTH
RELATIONSHIP	
[REDACTED]	[REDACTED]

4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY		
NAME (First, Middle)	TELEPHONE NUMBER	RELATIONSHIP
Mr. [REDACTED]		Brother-in-law
Other address (City, State, Zip Code), or name & telephone number of dependent if applicable		

5. PERSON RESIDING IN TEXAS THAT I HAVE BEEN ASSISTED IN FROM TIME OF APPOINTMENT THROUGH PRESENT		
Seguin School District System		
If the above listed person resides in your state, provide name and address of		
dependent or employee who can help me		

6. If the above or another list of dependents is not adequate to the point of one dependent per line, then add more or provide an employee or person of my choice whose name and address are not included on this list		
[REDACTED]		
X		

7. If the above list of dependents has been completed, then indicate below if all dependents are listed or if additional dependents exist		
X		

8. The person named in Item 4 is listed here for his benefit in case of emergency. If this notification is not to be used, I will send or mail to chief element, Person in Charge, AFSCB, San Antonio, Texas, the reverse side of this form		
[REDACTED]		

CONFIDENTIAL

**CONFIDENTIAL**

When Filled In!

**5.****VOLUNTARY ENTRIES**

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
IF YES, DO YOU HAVE A JOINT ACCOUNT?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?	<input type="checkbox"/> YES	<input type="checkbox"/> NO. (If "Yes" where is document located?)
HAVE YOU PREPARED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?		
<input type="checkbox"/> YES	<input type="checkbox"/> NO. (If "Yes" give name(s) and address)	
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input type="checkbox"/> NO. (If "Yes", who possess the power of attorney?)		

**6.****ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS****7.****RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY  
(No Approval Required)**

RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN MR 22-3 (Full Address)
--	--

**8.** **CHANGE IN PERMANENT PLACE OF RESIDENCE (See MR 22-3)**  
**(To Be Completed by Employee Pending Such Change While Assigned to Headquarters)**

FULL ADDRESS	DUTY STATION OR DESTINATION	DATE
Effective on residence (when applicable) Date per MR 22-3)		
SIGNED BY <i>[Signature]</i>	TYPE	SUPERVISOR <i>[Signature]</i>

**CONFIDENTIAL**

**SECRET**  
When filled in)

## REPORT OF SERVICE ABROAD

FILE

10

Office of Personnel, Control Division, Statistical Reporting Branch

PUBLISHED  
By Brinck

SERIAL NO.	LAST	FIRST	MIDDLE
036130	FLORES	<sup>(PRINT)</sup> BENIEL	

INSTRUCTORS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO SEE NO. 30, REVISED.

**PCS DATES OF SERVICE**

**TDY DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	D/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR				CODES
25-26	27-28	29-30	31-32	33-34	35-36	3 - TDY (Basic)	1498		
						4 - CORRECTION	37	38-39	40-42
						5 - CANCELLATION			
04	26	76	0	50	87	2		WESTERN	
								Hem	8/8/1

OFFICE OF PERSONNEL USE ONLY - PUBLIC AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT

Other Species

DISCUSSION

— 1 —

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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PROFESSIONAL FOLDER.

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ADMINISTRATIVE  
Internal Use Only

## REPORT OF SERVICE ABROAD

FILE

## PUNCTUED

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**Office of Personnel, Control Division, Statistical Re-**

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SERIAL NO

## FLARES.

PARIEL

ING INSTITUTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCN OR TTY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ONE ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 56, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA			O/P USE		COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCB (Basic)	2 - CORRECTION	3 - CANCELLATION	FILE	ONLY	CODE	
29-20	27-28	29-30	31-32	33-34	39-36				37	18-39	40-42	

**TDY DATES OF SERVICE**

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P. USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
28-29	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CONNECTION 6 - CANCELLATION	37	36-39	WESTERN
061	1526	062076					2		HEMISPHERE 8/1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT

Digitized by srujanika@gmail.com

DISPATCH

• 1000000000000000

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CHINESE (Simplified)

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
LA 07-76	6-14-76
REMARKS	

PREPARED BY	REPORT SUBMITTED TO CENTRAL INTELLIGENCE	ABOVE DATA CERTIFIED CORRECT BASED UPON SOURCE DOCUMENT CITED
4	8-20-26	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

C-O-N-F-I-D-E-N-T-I-A-L

TRAINING REPORT

Instructor Training Workshop

Student:	Flores, Daniel	Office:	OTR
Year of Birth:	<input type="text"/>	SD:	D
Grade:	GS-12	EOD Date:	1962
Number of Students Enrolled:	<input type="text"/>	Date of Course:	7/26 - 8/8/76

COURSE OBJECTIVES--CONTENT AND METHODS

The Workshop objectives provide participants with a knowledge of the major principles, methods, and practices of effective instruction, and an opportunity to develop skills as an instructor by applying this knowledge in an instructional setting. Participants are able to analyze their audience and teaching objectives, prepare lesson plans, effectively present the material to be learned, and then evaluate the results of their training efforts.

The instruction required maximum student involvement with major emphasis on the application of instructional methods in the students presentation of units of instruction. Students were not graded during the Workshop, but they were constructively evaluated by the instructor and fellow participants both verbally and through the use of video tape.

Students were required to give a fifteen-minute lecture, a twenty-minute demonstration, and a fifty-minute lesson in his basic subject.

ACHIEVEMENT RECORD

This is a certificate of attendance only, since examinations are not used in the course.

FOR THE DIRECTOR OF TRAINING

11/10/76  
DATE

Chief Instructor

E 2 IMPDET CL BY 010628

C-O-N-F-I-D-E-N-T-I-A-L

ADMINISTRATIVE  
Internal Use Only

036130

3/1-135/4534

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Report

SERIAL NO.	LAST (Print)	FIRST (Initials)	NAME NUMBER
1-8 036130	Flemes	Alvin	

FILE  
PUNCHED  
BY L

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 98, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
26-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38	39
						2 - CORRECTION			
						3 - CANCELLATION			

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
26-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	38	39
						4 - CORRECTION			
						5 - CANCELLATION			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER		DISPATCH
CABLE		DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)		

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
OLD		
<input checked="" type="checkbox"/> B-L DIVISION, CTSP.	DATE 11/21/75	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

100-14518-11-PERIOD

ADMINISTRATIVE-Internal Use Only

14-101

**ADMINISTRATIVE**  
Internal Use Only

**REPORT OF SERVICE ABROAD**

TO:

Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

136130

LAST

FLORES

FIRST

DANIEL

**FILE  
PUNCHED  
BY**

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (O/P ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 89, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38-39	
						3 - CORRECTION			40-42
						9 - CANCELLATION			

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	38-39	
						4 - CORRECTION			40-42
						6 - CANCELLATION			
07	25	75	07	29	75	2		LATIN AMERICAN	825

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.                    DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	<input checked="" type="checkbox"/> REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
O&O C & S DIVISION, CTB&S C & T DIVISION	DATE 12-1-65	SIGNATURE 12-1-65

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET  
(Do not Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel Control Division, Statistical Reporting Branch

SERIAL NO.

036130

FILE  
PUNCHED

BY

LAST

FLORES

FIRST

7-24

NAME

MIDDLE

DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	3 - PCS (Basic) 4 - CORRECTION 5 - CANCELLATION	37	38	39

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38	39
1208	75	12	13	75		2			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

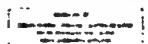
SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	
DOCUMENT IDENTIFICATION NO. LA-07-76	DOCUMENT DATE/PERIOD Dec 3-13-75

REMARKS

PREPARED BY DCO	REPORT ANNOTATED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
1-B & DIVISION, CSDR.	DATE	SIGNATURE
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



**SECRET**  
*(When Filled In)*

## **REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting/

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	(Print) FLORES	7-26 DANIEL	<del>SEARCHED INDEXED FILED BY</del>

## **INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 50, REVISED.

**PCS DATES OF SERVICE**

**TDY DATES OF SERVICE**

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Space for 1)	

DOCUMENT IDENTIFICATION NO.	DOCUMENT DATE/PERIOD
LA-145-76	10/15-22/75

**MARKS**

PREPARED BY	REPORT APPROVED ON CONTROLS DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE CITED
ECO		
CBL DIVISION, ECO.	DATE	
C&T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**SECRET**  
(When Filled In)

**REPORT OF SERVICE ABROAD**

**TO:** Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	(Print) 7-24 FLORES DANIEL		

**INSTRUCTIONS**

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One Only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF 40, 58, REVISED.

**PCS DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
29-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	30	39
						2 - CORRECTION			
						3 - CANCELLATION			

**TDY DATES OF SERVICE**

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREAS	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
29-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	30	39
						4 - CORRECTION			
						6 - CANCELLATION			

**OFFICE OF PERSONNEL USE ONLY - PUNCH AREA**

**SOURCE DOCUMENT AND CERTIFICATION**

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

LA 146-76

DOCUMENT DATE/PERIOD

OCT 30 - NOV 4-75

BY WH-BRETT

PREPARED BY	REPORT SUBMITTED BY SPECIAL AGENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT USED
W.H. BRETT	W.H. BRETT	W.H. BRETT
10-10-81	10-10-81	10-10-81

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

10-10-81 10-10-81

SECRET

10-10-81

ADMINISTRATIVE  
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S/E

REPORT OF SERVICE ABROAD

TO:

Office of Personnel, Control Division, Statistical Reporting

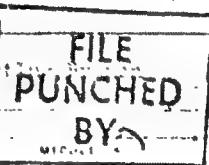
SERIAL NO.

NAME

1-0  
C76130

LAST  
(PRINTED)  
ELZAKES

FIRST  
JAMES



INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 80, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38	39
						3 - CORRECTION			
						5 - CANCELLATION			

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	37	38	39
						4 - CORRECTION			
						6 - CANCELLATION			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER		DISPATCH
CABLE		DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)		

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT SUBMITTED BY CONTROLLER	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
S-0-10000000000000000000	DATE 11-12-75	SIGNATURE J. O. J. ELZAKES

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

100-14510-11-100

ADMINISTRATIVE-Internal Use Only

60-181

SECRET  
(When Filled In)

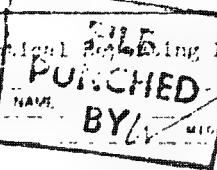
S/E

REPORT OF SERVICE ABROAD

TO:

Office of Personnel, Control Division, Statistical Planning Branch

SERIAL NO.	LAST  I-6 036130	FIRST  (PRINT) Flores	MIDDLE  Daniel
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INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF HQ. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37 38 39	40-42

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)
MONTH	DAY	YEAR	MONTH	DAY	YEAR			
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39	40-42
0 6 0 5 7 5	0 6 1 1 7 5					2		Europe 8 0 1

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	<input type="checkbox"/> DISPATCH
<input type="checkbox"/> CABLE	<input type="checkbox"/> DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. / DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY  O&G X C & S DIVISION, GPOB	REPORT SUBMITTED ON  X 100% REVIEWED DATE 3/15/75	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
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THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

**SECRET**

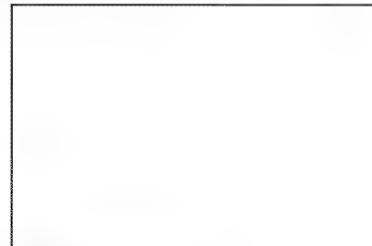
*OPF*

18 NOV 1975

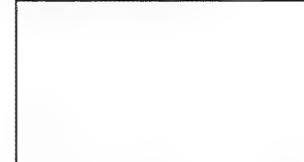
MEMORANDUM FOR THE RECORD

SUBJECT: Meritorious Unit Citation -- Cuban Operations Group,  
Latin America Division

On 13 November 1975 the Director of Central Intelligence  
approved award of the Meritorious Unit Citation to the Cuban  
Operations Group in recognition of the outstanding performance  
of the following employees from 1 October 1974 to 30 September  
1975:



Daniel Flores



R. L. Austin, Jr.  
Recorder  
Honor and Merit Awards Board

Distribution:

- 1 - Each OPF
- 1 - C/LA
- 1 - Recorder/HMAB
- 1 - Exec Sec/HMAB

**SECRET**

E2 Impdet C1 By 014029

ADMINISTRATIVE  
Internal Use Only

*File*  
**PUNCHED**  
BY/G

REPORT OF SERVICE ABROAD

TO:

Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.

1-8  
36130

LAST  
(PRINT)  
FLORES

FIRST  
1-24  
DANIEL

NAME

010000

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOV. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (FOR PCS), REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58 040529.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	37	38-39	40-42
						2 - CORRECTION			
						3 - CANCELLATION			

TOV DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - TOV (Basic)	37	38-39	40-42
						2 - CORRECTION			
						3 - CANCELLATION			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.

DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT APPROVED BY CONTROLLER	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITY
1-8 DIVISION STB 1-8 DIVISION	DATE 9/19/65	SIGNATURE

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

1-8 INSISTENCE

ADMINISTRATIVE-Internal Use Only

10-101

SECRET

(When Filled In)

FILE

FEB 1974

BY JAC

## REPORT OF SERVICE ABROAD

TO:  
Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO. -	LAST	FIRST	NAME MIDDLE
036130	Flowers	Daniel	

## INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TOY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One Only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OPI NO. 5B, REVISED.

## PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 2 - CORRECTION 3 - CANCELLATION	37	38 39	40-48
									570
03 05 74									

## TOY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TOY (Basic) 4 - CORRECTION 6 - CANCELLATION	37	38 39	40-48

## OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

## SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH		
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT		
OTHER (Specify)			
DOCUMENT IDENTIFICATION NO. 185131	DOCUMENT DATE/PERIOD		
REMARKS			
PREPARED BY BCO	REPORT ABSORBED ON CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	
C & L DIVISION, CTOB X C & T DIVISION	DATE 3/08/74	SIGNATURE	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

ADMINISTRATIVE  
Internal Use Only

S/E

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Control Division, Statistical Reporting

						FILE <b>PUNCHED BY J.W.</b>			
SERIAL NO.	LAST	NAME							
100	(PRTNRS)	FIRST	MIDDLE	LAST	YEAR	CITY	STATE		
026130	FLORES	DANIEL			774				
INSTRUCTIONS									
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESCRIBE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58, REVISED.									
PCS DATES OF SERVICE									
ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA			
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	COUNTRY	
25-25	27-29	29-30	31-32	33-34	35-36	2 - CORRECTION	37	38	39
						3 - CANCELLATION			
TDY DATES OF SERVICE									
ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA			
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	ARRAEST	
25-26	27-28	28-30	31-32	33-34	35-36	4 - CORRECTION	37	38	39
100574	100774					6 - CANCELLATION			
<u>OFFICE OF PERSONNEL USE ONLY - PUNCH AREA</u>									
SOURCE DOCUMENT AND CERTIFICATION									
<input checked="" type="checkbox"/> TRAVEL VOUCHER				DISPATCH					
<input type="checkbox"/> CABLE				DUTY STATUS OR TIME AND ATTENDANCE REPORT					
<input type="checkbox"/> OTHER (Specify)									
DOCUMENT IDENTIFICATION NO.				DOCUMENT DATE/PERIOD					
WHT 119-75				10/4 - 10/7/74					
REMARKS									
PREPARED BY		REPORT SUBMITTED ON		ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE					
<input checked="" type="checkbox"/> OPR		<input checked="" type="checkbox"/> FORWARD DOCUMENT							
U. S. DIVISION, CIVIL		DATE		SIGNATURE					
F. B. I. DIRECTOR		12/23/74							
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER									

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ADMINISTRATIVE-Internal Use Only

14-101

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE  
SACIFIED  
BY A

TO:

Office of Personnel, Transactions and Records Branch, Status [Section]

SERIAL NO.	NAME	
148	LAST (Print)	FIRST 7-80
045 25	FLORES 1211 161	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 38, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION	37 38 39		

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION	37 38 39		
07	07	74	07	11	74	2		60-71	811

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

<input checked="" type="checkbox"/> TRAVEL VOUCHER	DISPATCH
<input type="checkbox"/> CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO. / DOCUMENT DATE/PERIOD

REMARKS

PREPARED BY	REPORT ASSOCIATED OR CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
REC		
C & T DIVISION, CTB&R	DATE 6/1/74	SIGNATURE J. C. Bratton
C & T DIVISION		

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



ADMINISTRATIVE  
Internal Use Only

5/E

## REPORT OF SERVICE ABROAD

To: Office of Personnel, Control Division, Statistical Report

SERIAL NO.		LAST	FIRST	NAME	FILE PUNCHED BY/ <i>ler</i>
116	036130	(PRINTED) FLORES	DANIEL		

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR FITHEP PCS OF TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN  
TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, CP CANCELLATION (ONE ONLY), REPORT DATES BY USING  
THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58 REVISED.

## **PCS DATES OF SERVICE**

**TDY DATES OF SERVICE**

ARRIVAL Q/S			DEPARTURE Q/S			TYPE OF DATA			O/P USE		AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	ONLY		CODE	
25-26	27-28	28-30	31-32	33-34	35-36	3 - TOY (Basic)		37	38 39		40-42	
						4 - CORRECTION						
						5 - CANCELLATION						
08	1	274	65	16	34			2		19 Spec 4	811	

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

**SOURCE DOCUMENT AND CERTIFICATION**

TRAVEL VOUCHERS	DISPATCH
CABLE	BUREAU OF TIME AND ATTENDANCE REPORT

**status (Operational)** **Document identification no.** **Source of information** **12-17-04-001**

Digitized by Google

12-17 Ave. 34

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THIS REPORT MUST BE RETURNED TO THE OFFICE OF INSPECTOR  
IN THE INSPECTOR'S OFFICIAL POSTAGEPAID ENVELOPE

卷之三

170101-210023Z Oct 09 US

## SECRET

## FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
1. OF EMPLOYEE (use pseudo only if SA)	DATE (from Item 5-1)	NAME OF SUPERVISOR (true)	DATE (from Item 5-2)
Daniel Flores	27 Feb 73	Richard Welch	27 Feb 73
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
2 March 1973	HPLT-6502		
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE
		GS-11 FI Case Officer	
5. DATE OF PCS ARRIVAL IN FIELD	6. REQUESTED DATE OF DEPARTURE	7. EXPECTED DATE OF FIRST CHECK-IN AT HQ	8. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE
24 Sept 1971	30 Nov 1974	1 Feb 1975	15 Feb 1975 (depending on training.)
9. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:			
Wife: 37, daughter: 3			
10. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:			
None			
<p>LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSE-P 340-8)</p> <p>September 1971 - July 1972 - Activities of the [ ] and [ ] Preparation of project outlines and progress reports.</p> <p>August 1972 - Present - [ ] Operations. [ ] capability. Preparation of project outlines and progress reports.</p>			
<p>11. TRAINING DESIRED: Indicate what training you believe you should have during the next several years</p> <p>In the near future I would like to take an advanced operations course. In connection with this, I would like to concentrate on the [ ] and [ ] targets in Latin America. Special courses in these two areas would be extremely helpful. Some time in the future I would like to attend the mid-career course.</p>			

SECRET

## SECRET

## III. PREFERENCE FOR NEXT ASSIGNMENT:

TELL DESCRIBE DIRECTLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

At this point in my career the [ ] and [ ] targets are of major interest to me. Although I would prefer to work on [ ] operations in my next assignment, as an alternative I would consider working on [ ] operations.

III. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (1st, 2nd, and 3rd choice) IN REMAINING BOXS. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

EXTEND TOUR 14 MONTHS AT CURRENT STATION TO 31 November 1974  
(DATE)

BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.

1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_

BE ASSIGNED TO ANOTHER FIELD STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION.

1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_

RETURN TO MY CURRENT STATION

## TO BE COMPLETED BY FIELD STATION

IV. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Concur. This officer is doing a good job on his assigned targets and his overall abilities give the Station a flexibility it often needs to call on.

## TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

V. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Subject's tour has been extended fourteen months to 31 November 1974.

DATE 4/23/73 TITLE C/NW/Pers SIGNATURE H. Beythold

FOR USE BY CAREER SERVICE

VI. APPROVED ASSIGNMENT:

VII. EMPLOYEE NOTIFIED BY DISPATCHER NO. HPIS-3284 DATE (typed) 23 Apr 73

TABLE NO. \_\_\_\_\_ DATED \_\_\_\_\_

CAREER SERVICE REPRESENTATIVE: \_\_\_\_\_ DATE: \_\_\_\_\_

SECRET

SECRET  
(When Filled In)

REPORT OF SERVICE ABROAD

FILE

PUNCHED  
BY

TO:

Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.

LAST

FIRST

NAME

MIDDLE

1-0  
036130

(P/M/E)  
FLORES

7-24  
DANIEL

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (ONE ONLY). REPORT DATES BY USING THE NUMBER FOR THE MONTH AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO DFI NO. 50, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
26-26	27-28	29-30	31-32	33-34	35-36	1 - PCS (Basic)	0000	37	38-39
						3 - CORRECTION			
						5 - CANCELLATION			
							1		
			0	5	2	8	7	1	
									195

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA	O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR			CODE	CODE
26-26	27-28	29-30	31-32	33-34	35-36	2 - TDY (Basic)	0000	37	38-39
						4 - CORRECTION			
						6 - CANCELLATION			

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	
DOCUMENT IDENTIFICATION NO. 16318	DOCUMENT DATE/PERIOD 29 May 1971
REMARKS	

PREPARED BY S-1	REPORT SUBMITTED ON ROUTINE DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
S-1 DIVISION, STB S-1 DIVISION	DATE 6/9/71	SIGNATURE Z. J. Flores

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER



SECRET  
*(When filled in)*

## SERVICE ABROAD AGREEMENT

### I. GENERAL

IT IS UNDERSTOOD THAT YOU AGREE TO SERVE THE PERIOD OF SERVICE ABROAD PRESCRIBED IN SECTION II BELOW AND THAT THE GOVERNMENT IS OBLIGATED TO RETURN YOU, YOUR DEPENDENTS, AND YOUR HOUSEHOLD AND PERSONAL EFFECTS UPON THE SATISFACTORY COMPLETION OF THIS PERIOD. YOUR ALLOWABLE EXPENSES WILL BE DETERMINED IN ACCORDANCE WITH AGENCY REGULATIONS.

IF YOU TERMINATE YOUR PERMANENT ASSIGNMENT OUTSIDE THE CONTINENTAL UNITED STATES BEFORE YOU COMPLETE 12 MONTHS OF CREDITABLE SERVICE FOLLOWING THE DATE OF YOUR ARRIVAL ABROAD, YOU WILL BE REQUIRED TO REIMBURSE THE GOVERNMENT FOR ALL EXPENSES IT INCURS IN THE TRAVEL AND TRANSPORTATION OF YOU, YOUR DEPENDENTS, YOUR HOUSEHOLD AND PERSONAL EFFECTS TO YOUR POST. IF YOU FAIL TO COMPLETE YOUR PRESCRIBED TOUR OF DUTY ABROAD YOU WILL NOT BE ENTITLED TO THE RETURN TRAVEL AND TRANSPORTATION OF YOURSELF, YOUR DEPENDENTS AND YOUR HOUSEHOLD AND PERSONAL EFFECTS TO THE UNITED STATES. IF, HOWEVER, AGENCY OFFICIALS DETERMINE THAT YOUR EARLY DEPARTURE IS NECESSARY FOR OFFICIAL REASONS, OR FOR PERSONAL REASONS OF SIGNIFICANT INTEREST TO THE GOVERNMENT, THEY MAY WAIVE THE REIMBURSEMENT OF EXPENSES ALREADY INCURRED, OR AUTHORIZE YOUR RETURN TRAVEL AND TRANSPORTATION, WHICHEVER IS APPLICABLE.

IF ELIGIBLE UNDER THE TERMS OF HR 20-30, YOU WILL BE GRANTED HOME LEAVE AS SOON AS IT CAN BE ARRANGED AT GOVERNMENT CONVENIENCE AFTER COMPLETION OF YOUR PRESCRIBED TOUR OF DUTY, PROVIDED YOU HAVE SERVED AT LEAST 18 MONTHS OF CONTINUOUS CREDITABLE SERVICE OUTSIDE THE UNITED STATES. HOME LEAVE AND HOME LEAVE TRAVEL ARE CONTINGENT UPON YOUR WILLINGNESS TO RETURN, AND CONtemplATION BY AGENCY OFFICIALS THAT YOU WILL RETURN TO SERVICE OUTSIDE THE UNITED STATES IMMEDIATELY AFTER HOME LEAVE OR UPON COMPLETION OF AN ASSIGNMENT IN THE UNITED STATES.

YOU ARE ADVISED THAT ANY MONIES DUE YOU FROM THE GOVERNMENT MAY BE APPLIED IN LIQUIDATION OF ANY INDEBTEDNESS ARISING FROM VIOLATION OF THIS AGREEMENT. YOU WILL BE AFFORDED ALL NORMAL RECOURSE IN APPEALING DECISIONS MADE PURSUANT TO THIS AGREEMENT.

NAME OF EMPLOYEE Daniel Flores	30	D
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### II. TOUR OF DUTY ABROAD

1. NAME OF POST OF ASSIGNMENT  
Currently \_\_\_\_\_ and Next Assignment: \_\_\_\_\_

2. PERIOD OF SERVICE ABROAD AS PRESCRIBED IN A, B, OR C BELOW

A. STANDARD TOUR OF DUTY OF 24 MONTHS

C. NONSTANDARD TOUR OF DUTY OF \_\_\_\_\_ MONTHS FOR THIS TOUR ONLY FOR THE EMPLOYEE SIGNING THIS AGREEMENT.  
(See HR 20-18)

B. NONSTANDARD TOUR OF DUTY OF \_\_\_\_\_ MONTHS PREVIOUSLY APPROVED PER HR 20-18.

REQUESTED (Memo attached)

OPERATING OFFICIAL

CONCUR

CAREER SERVICE

DEPUTY DIRECTOR

OPERATING OFFICIAL

APPROVED

DIRECTOR OF PERSONNEL

*No 144/Pes*

### III. PERMANENT PLACE OF RESIDENCE

3. YOUR "PERMANENT PLACE OF RESIDENCE" IS A PLACE TO WHICH ALLOWABLE TRAVEL AND TRANSPORTATION EXPENSES MAY BE AUTHORIZED IN CERTAIN CIRCUMSTANCES PURSUANT TO HR 22. ITS DESIGNATION WILL BE KEPT IN YOUR OFFICIAL PERSONNEL FOLDER.

4. IN REQUESTING YOUR PERMANENT PLACE OF RESIDENCE IN ITEM 5 ON THE REVERSE SIDE, YOU WILL FOR INFORMATION IN HR 22-33 NORMALLY INDICATE THE PLACE WHERE YOU PHYSICALLY DWELL IN THE UNITED STATES, ITS POSSESSIONS OR THE COMMONWEALTH OF PUERTO RICO AT THE TIME OF YOUR PAY TRANSFER TO A POST ABROAD. YOU MAY REQUEST IN ITEM 6 THE DESIGNATION OF ANOTHER PLACE AS YOUR PERMANENT PLACE OF RESIDENCE IF YOU CAN ESTABLISH THAT YOUR PHYSICAL DWELLING PLACE IS FOR PAY TRANSFER AND THAT SUCH OTHER PLACE IS YOUR DOMICILE OR HAS PREVIOUSLY BEEN USED BY YOU AS A PHYSICAL DWELLING. INFORMATION THAT CAN BE PRESENTED IN AN ATTACHED STATEMENT AS EVIDENCE INCLUDES BUT IS NOT LIMITED TO, STATE VOTING REGISTRATION, PROPERTY OWNERSHIP AND PLACE WHERE INCOME OR PERSONAL PROPERTY TAXES HAVE BEEN PAID.

## SECRET

(When Filled In)

D. PHYSICAL Domicile PLACE (Permanent Place of Residence unless address in Item 6 is approved in lieu thereof)

FULL ADDRESS

Washington, D. C.

E. OTHER PLACE REQUESTED (Requested Permanent Place of Residence of different from Item 5)

FULL ADDRESS

## CONCUR

DEPUTY DIRECTOR

DATE

## APPROVED

DEPUTY DIRECTOR

DATE

5-20-71

## APPROVED

DIRECTOR OF PERSONNEL

DATE

## IV. HOME LEAVE POINT

7. AMONG THE PLACES YOU MAY REQUEST AS A HOME LEAVE POINT ARE: YOUR PERMANENT PLACE OF RESIDENCE SHOWN ABOVE, HEADQUARTERS AREA, AND WHERE YOUR CHILDREN, PARENTS, PARENTS-IN-LAW, BROTHERS, SISTERS, BROTHERS-IN-LAW, OR SISTERS-IN-LAW RESIDE.

8. YOU MAY REQUEST FOR APPROVAL SOME OTHER POINT SUBJECT TO THE PROVISIONS OF HH 20-30B(3)(C). THE REQUEST MUST BE ACCCOMPANIED BY A MEMORANDUM EXPLAINING THE CIRCUMSTANCES.

## 9. DESIGNATION PER ITEM 7 ABOVE

FULL ADDRESS

Milwaukee, Oregon

## 10. DESIGNATION PER ITEM 8 ABOVE.

FULL ADDRESS

## CONCUR

DEPUTY DIRECTOR

DATE

RELATIONSHIP OF RELATIVE AT HOME LEAVE POINT  
Parents-in-law

## APPROVED

DEPUTY DIRECTOR

DATE

5-20-71

## APPROVED

DIRECTOR OF PERSONNEL

DATE

## EMPLOYEE CERTIFICATION

I have read and understand my service obligations and travel entitlements as described in this agreement.

SIGNATURE OF EMPLOYEE

See Dispatch Attached

*Daniel E. Dow*

DATE

5/20/71

SECRET

## CONFIDENTIAL

(When Filled In)

## RESIDENCE AND DEPENDENCY REPORT

An original of this form will be executed by each employee at the time of his appointment and when a change occurs in the information shown below. Items of change may be reported in the appropriate blocks without completing the remainder of the form except the employee's signature and date. When executing item 4 also comply with WWD 20-1, Personnel Emergency and Locator Record. This form will be completed only by Headquarters Personnel and not sent to the field. Form will be filed in the employee's official personnel folder.

## GENERAL

NAME OF EMPLOYEE (Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER
FLORES	Daniel		
1. MARITAL STATUS (Check one)			
SINGLE	<input checked="" type="checkbox"/>	MARRIED	<input type="checkbox"/>
SEPARATED	<input type="checkbox"/>	DIVORCED	<input type="checkbox"/>
WIDOWED	<input type="checkbox"/>	ANNULLED	<input type="checkbox"/>
IF MARRIED, PLACE OF MARRIAGE		DATE OF MARRIAGE	
Lima, Peru		18 November 1960	
IF DIVORCED, PLACE OF DIVORCE DECREE		DATE OF DECREE	
2. MEMBERS OF FAMILY			
NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.	
NAME OF CHILDREN	ADDRESS (Same as above.)	SEX	DATE OF BIRTH
NAME OF FATHER (or male guardian)	ADDRESS	TELEPHONE NO.	
	Gonzales, Texas 78629	512-672-6061	
NAME OF MOTHER, INCLUDING MAIDEN NAME (or female guardian)	ADDRESS	TELEPHONE NO.	
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.			
Mr. [Redacted]			
3. OTHER RELATIVES WHO ARE DEPENDENT UPON ME FOR AT LEAST 50% OF THEIR SUPPORT AND MEET OTHER REQUIREMENTS IN TRAVEL REGULATIONS (WHR 22-15). SPECIFY NAMES AND RELATIONSHIPS.			
NAME	DATE OF BIRTH	RELATIONSHIP	
4. PERSON RESIDING IN U.S. TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Last, First, Middle)	(Last-First-Middle)	RELATIONSHIP	
Mr. [Redacted]		Brother-in-law	
HOME ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE		HOME TELEPHONE NUMBER	
[Redacted] Seguin, Texas 78155		512-379-7620	
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE		BUSINESS TELEPHONE & EXTENSION	
IS THE INDIVIDUAL NAMED ABOVE HAVING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization he believes you work for.)			
[Redacted]		YES	X
		NO	
IS THE INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPACITATED? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)			
[Redacted]		YES	
		NO	X
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in Item 6.)			
[Redacted]		YES	X
		NO	
THE PERSON NAMED IN ITEMS 2 OR 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.			

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**VOLUNTARY SENSES**

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

The First National Bank, Federal Office, 1750 Pennsylvania Avenue,  
N.W., Washington D.C.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?  YES  NO  
IF YES, DO YOU HAVE A JOINT ACCOUNT?  YES  NO  
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. (If "Yes" where is document located?)

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?

YES  NO. (If "Yes" give name(s) and address)

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. If "Yes", who possesses the power of attorney?

**6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS**

**7. RESIDENCE DATA - TO BE COMPLETED ONLY BY EMPLOYEES ENTERING ON DUTY  
(No Approval Required)**

RESIDENCE WHEN EMPLOYED (Full Address)	PERMANENT PLACE OF RESIDENCE AS DEFINED IN MR 22-3 (Full Address)
--	--

**CHANGE IN PERMANENT PLACE OF RESIDENCE (See HR 33-33)**  
**(To Be Completed by Employee Desiring Such Change While Assigned to Headquarters)**

FULL ADDRESS	DEPUTY DIRECTOR OR DESIGNEE	DATE
	DIRECTOR OF PERSONNEL (when applicable per HR 32-3)	DATE

SIGNED AT	DATE	SIGNATURE
Headquarters	7 Aug 91	Paul Dorey

**CONFIDENTIAL**

**CONFIDENTIAL**

SECRET

## FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from Item S-2)	NAME OF SUPERVISOR (true)	DATE (from item S-2)
Daniel Flores			
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
30 October 1970	HEQT 1506	04 MAR 1971	

## TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE Operational Officer GS-10	4. STATION OR BASE	5. DRAFT FOR CURRENT COVER ENCLOSURE
6A. DATE OF PCS ARRIVAL IN FIELD	6B. REQUESTED DATE OF DEPARTURE	6C. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6D. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
13 May 1969	15 May 1971	1 June 1971	1 August 1971	

## 7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

Spouse (Expecting child in March 1971)

## 8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

NA

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form).  
*(also attach personal cover questionnaire in accordance with CSI-P 240-8)*

Case Officer responsibilities including running project targetted against [redacted] agent handling including [redacted] and related support agents; preparation of intelligence reports, dispatches and other reports related to Case Officer duties.

10. TRAINING DESIRED:  
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS

1. Soviet Operations Course. (If possible, I would like to co-ordinate this course with my home leave in the summer of 1971.)
2. Language training. Preferably [redacted] because I would like to serve in [redacted] sometime in the future.



SECRET  
(When Filled In)

FILE  
PUNCHED  
BY RT

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	NAME		
	LAST	FIRST	MIDDLE
036130	(Print)	J. E. D.	

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One Only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFF NO. 58, REVISED.

PCS DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA		O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	CODE	38 39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	2 - CORRECTION	37	38 39	40-42	
05	13	69				3 - CANCELLATION	/		145	

TDY DATES OF SERVICE

ARRIVAL D/S			DEPARTURE D/S			TYPE OF DATA		O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	CODE	38 39	CODE	
25-26	27-28	29-30	31-32	33-34	35-36	3 - CORRECTION	37	38 39	40-42	
						4 - CANCELLATION				

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	

DOCUMENT IDENTIFICATION NO.: 245137800 DOCUMENT DATE/PERIOD: 15 May 1967

REMARKS

PREPARED BY	REPORT ASSOCIATED WITH CONTROLS DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED	
010			
101 DIVISION 1700	DATE 21/11/67	SIGNATURE	
101 DIVISION 1700			

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL  
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

~~SECRET~~

Not Approved by  
CS Career Service

68 JAR pm

MEMORANDUM FOR: Secretary, CSCS Panel (Section C)

SUBJECT : Recommendation for Promotion to Grade  
GS-10, Daniel Flores

1. It is recommended that Mr. Daniel Flores be promoted from GS-09 to GS-10.

2. Mr. Flores joined the Agency in 1962; initially he was employed on a part-time basis in the WDI Division while attending the American University. He received his AB degree in 1967 and became a full-time staff employee. On the strong recommendation of his supervisors, Mr. Flores was accepted for the Career Training Program which he completed in August 1968. After rejoining the WDI Division, he was selected for assignment as an operations officer at the [redacted] Base where he arrived in May 1969. Mr. Flores is bilingual in Spanish.

3. Both as a Headquarters and field operations officer Mr. Flores has carried out his assignments with intelligence, enthusiasm and initiative. As the [redacted] Base officer in charge of [redacted] operations, his performance has been of high caliber. In August 1969, during the forced absence of the Chief of Base and other senior officers, Mr. Flores assumed the full responsibilities for running the base for a period of several weeks. He performed the duties of Acting Chief of Base in a superior manner. In addition to his operational competence, the [redacted] Chief of Base has observed that Mr. Flores' ability to develop social relations with ease has been a distinct asset for the Base.

4. Mr. Flores has already proven to be a competent operations officer. As he further develops through experience and responsibility he should become eligible for rapid advancement. In any case he is already performing at a level far higher than his current grade and a promotion at this time is strongly recommended.

*William V. Broe*  
William V. Broe  
Chief  
Western Hemisphere Division

~~SECRET~~

CONFIDENTIAL  
(When filled in)

I M P O R T A N T

Central Processing Branch has been charged with responsibility for ensuring that all employees processing PCS to the field have reviewed the field version of the Employee Conduct Handbook. You will not be checked out for your proposed travel until you sign the following statement and return it to CPB. Your Personnel Officer can provide you with a copy of the Handbook.

M E M O R A N D U M O F U N D E R S T A N D I N G

I hereby acknowledge that I have read and understand the contents of Field Handbook 20-4, Employee Conduct, dated 28 October 1964.

Daniel Flores  
Signature

DANIEL FLORES

7 April 1969  
Date

CONFIDENTIAL

Group 1 - Excluded from automatic downgrading and declassification.

## CONFIDENTIAL

(When Filled In)

Complete in original. The data recorded on this form is essential in determining travel expenses allowable in connection with leave of government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE	(Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER
Elmer L. Daniel				
1. RESIDENCE DATA				
PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)			
Washington, D.C.				
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE	HOME LEAVE RESIDENCE			
Washington, D.C.	(Washington, D.C.)			
2. MARITAL STATUS (Check one)				
SINGLE	MARRIED	SEPARATED	DIVORCED	WIDOWED
IF MARRIED, PLACE OF MARRIAGE		DATE OF MARRIAGE		
Lima, Peru		14/16/1960		
IF DIVORCED, PLACE OF DIVORCE DECREE		DATE OF DECREE		
IF WIDOWED, PLACE SPOUSE DIED		DATE SPOUSE DIED		
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)				
3. MEMBERS OF FAMILY				
NAMES OF CHILDREN	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO.		
	1160 Main Street			
NAME OF YOUR MOTHER (Or female guardian)	ADDRESS	SEX	DATE OF BIRTH	
Deceased	Gonzales, Texas (Box 39)			
HOME ADDRESS (No., Street, City, State, Zip Code)	ADDRESS	TELEPHONE NO.		
	1160 Main Street	512/672-6061		
BUSINESS ADDRESS (No., Street, City, State, Zip Code), AND NAME OF EMPLOYER, IF APPLICABLE	BUSINESS TELEPHONE & EXTENSION			
(Same as above)	(512) 672-7620			
IS THE INDIVIDUAL NAMED ABOVE HAVING ANY AGENCY AFFILIATION? (If "No" give name and address of organization from he believes you work for.)				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPACITATED? (If "No" give name and address of person who would make such decisions in case of emergency.)				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in Item 6.)				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
The persons named in item 3 above may also be notified in case of emergency. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.				
CONTINUED ON REVERSE SIDE				
CURRENT RESIDENCE AND DEPENDENCY REPORT				

**CONFIDENTIAL**  
(When Filled In)

**VOLUNTARY ENTRIES**

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

Riggs National Bank : Daniel Dolan [redacted] Flores  
17th and Penn. Avenues, Washington, D.C.  
(1750 Penn Avenue)

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION?  YES  NO  
IF YES, DO YOU HAVE A JOINT ACCOUNT?  YES  NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. (If "Yes" where is document located?)

At home. Will leave with responsible person for safe keeping

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?  YES  NO. (If "Yes" give names and address)

N/A

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. (If "Yes", who receives the power of attorney?)

But may before I know.

**ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS**

My father should not be notified in case of an emergency because of his health and age.

SIGNED AT

DATE

SIGNATURE

7 Apr 1969

Daniel Dolan

CONFIDENTIAL

SECRET

7-12

Supplement to Staff Employee Personnel

[Redacted] Daniel Flores

Effective 10 April 1969

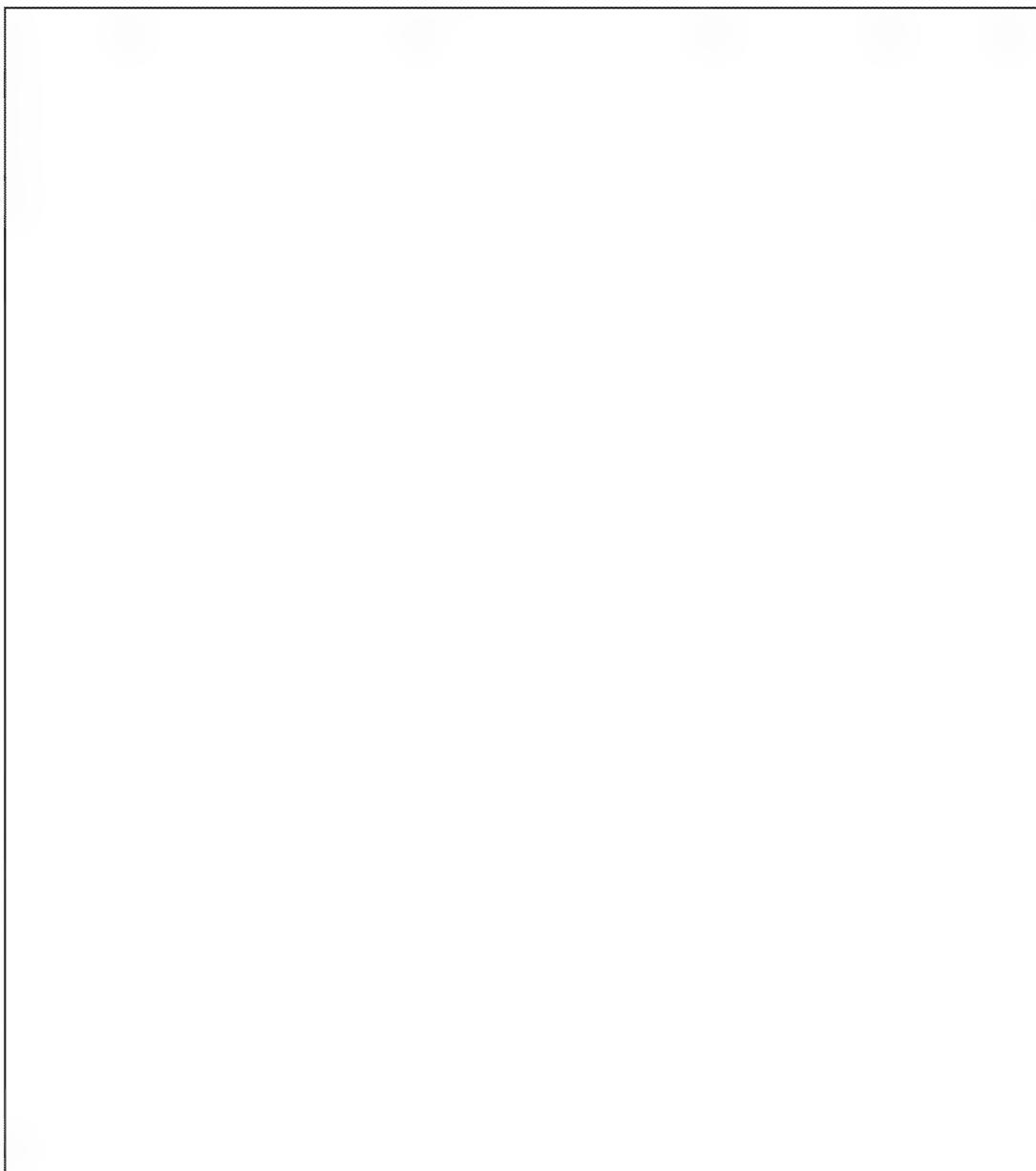
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Form 1535 [Redacted]

SECRET

10-121

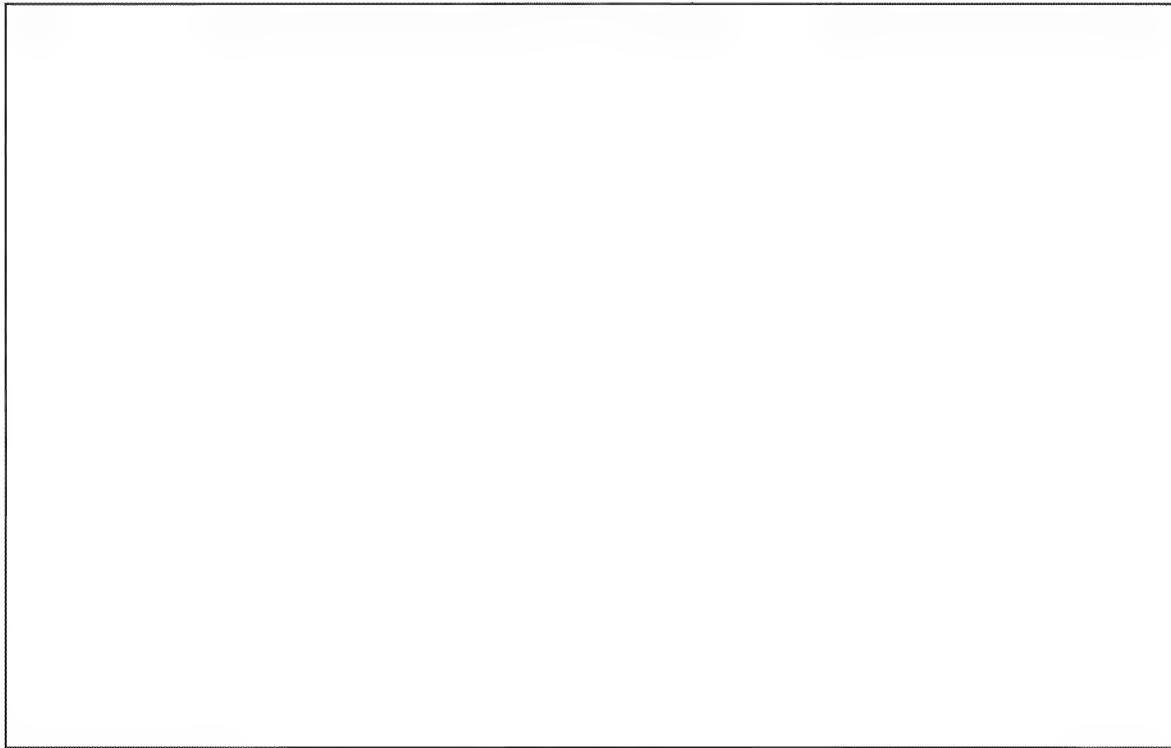
SECRET



2

SECRET

SECRET



UNITED STATES GOVERNMENT



Personnel Office

ACCEPTED:

Daniel Z. Brown

3

Form 1535c 10-1960

SECRET

10-11

ELECTION, DECLINATION, OR WAIVER  
OF LIFE INSURANCE COVERAGE  
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

IMPORTANT  
AGENCY INSTRUCTIONS  
ON BACK OF ORIGINAL

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last) 036 (first) (middle) DATE OF BIRTH (month, day, year) SOCIAL SECURITY NUMBER

Flores Daniel

EMPLOYING DEPARTMENT OR AGENCY

LOCATION (City, State, ZIP Code)

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here —  
if you  
WANT BOTH  
optional and  
regular  
insurance

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here —  
if you  
DO NOT WANT  
OPTIONAL but  
do want  
regular  
insurance

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of optional insurance.

Mark here —  
if you  
WANT NEITHER  
regular nor  
optional  
insurance

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot hire or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4 SIGN AND DATE IF YOU MARKED BOX "A" OR "C".  
COMPLETE THE "STATISTICAL STATE" THEN RETURN  
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE

FOR EMPLOYING OFFICE USE ONLY

(Initials and date stamp)

1-18

U.S. Office of Personnel, Bureau of Life Insurance

Printed name of employee \_\_\_\_\_  
Date \_\_\_\_\_  
Signature \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_

OPTIONAL (A) (C) - Before or After a Personnel Action

S-E-C-R-E-T

- TRAINING REPORT -

Operational Interrogation Course No. 2-69  
(Full time - three weeks) 4 - 22 November 1968

Student: Flores, Daniel                      Office: WH

Grade : 08                                  EOD : Mar 62

Number of Students Enrolled:  Service Designation: D

COURSE OBJECTIVE

RATING

Class Performance : Satisfactory

Interrogation Aptitude: Average

GENERAL CLASS PERFORMANCE

Excellent: 3                              Satisfactory: 6                      Unsatisfactory: 0

GENERAL CLASS APTITUDE FOR INTERROGATION

High: 2                                  Average: 6                              Low: 1

FOR THE DIRECTOR OF TRAINING:

27 DEC 1968

Date

Chief Instructor

S-E-C-R-E-T

## C-E-C-R-E-T

TRAINING REPORT OPERATIONS COURSE (FULL TIME)	Course No. OC-1-3/4-68	No. of Students Began      Finished 30            30	Date of Course 27 May - 16 August 1968
STUDENT IDENTIFYING INFORMATION			
NAME OF STUDENT	YOB	ECD DATE	OFFICE
FLORES, Daniel		March 1947	CTP
PERFORMANCE EVALUATION			

W - Weak	Ranges from inadequate to less than satisfactory (in terms of a new and inexperienced case officer).
A - Adequate	Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.
P - Proficient	More than satisfactory. Has acquired a solid beginner's proficiency. This rating may be interpreted as representing "average" on our rating scale.
S - Strong	Exceptional proficiency, characterized by thoroughness, initiative, originality, and an exceptional student understanding of the case officer role in clandestine operations.
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of other students doing similar work as to warrant special recognition.

## COURSE OBJECTIVE

This course is designed to prepare selected staff officers from the Career Trainee Program for field operations officer work with the Clandestine Services. The student's understanding of the Clandestine Services doctrines, policies and operational concepts and his ability to apply these related items is measured by a series of practical exercises. Successful completion of the Operations Familiarization Course (OPC) is a prerequisite for admission to the Operations Course.

## RATING LETTER

TRADECRAFT	P
INTELLIGENCE AND OPERATIONAL INFORMATION REPORTING	P
CLANDESTINE SERVICES OPERATIONAL PROGRAMS	P

The trainee also received basic instruction and practical work

This rating corresponds to the statement which most accurately reflects the student's level of performance and takes into account everything about him which influenced his effectiveness. This rating is a reflection of the degree to which the instructors feel that the student is both suitable and competent for overseas service in the Clandestine Services.

OVERALL PERFORMANCE
P

Overall performance ratings of all students in this class:

WEAK 0      ADEQUATE 0      PROFICIENT 40      STRONG 4      OUTSTANDING 2

C-E-C-R-E-T

S-E-C-R-E-T

LARRATIVE COMMENTS

Significant strengths and weaknesses and their relationship to overall performance in the Operations Course. This section amplifies and explains, as necessary, the rating letter given above.

Mr. Flores' overall performance in this course was at the high proficient level. He is a very friendly and personable individual who put forth a good deal of effort to do well in the course. Mr. Flores takes a very practical approach to solving problems and his attitude throughout the course was excellent.

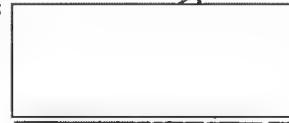
Mr. Flores acquired a good understanding of the principles and techniques of Clandestine Services operations, and in problems requiring [redacted] in the live exercises he came through as a very friendly and personable individual. He was particularly effective in debriefing situations and demonstrated flexibility in meeting the problems that arose during the [redacted]

Mr. Flores demonstrated a good understanding of Clandestine Services programs in Foreign Intelligence, Counterintelligence and Covert Action. His performance was graded strong in handling of a [redacted] and in a Counterintelligence case study and a Covert Action case study his understanding and analyses were judged highly proficient. He received a rating of adequate in photography.

Mr. Flores has good writing skills and acquired a thorough understanding of intelligence and operational reporting procedures and formats of the Clandestine Services. His intelligence reports were consistently complete, accurate and clear. His operational reports suffered occasionally from weak organization, and on one occasion he had difficulty distinguishing operational from intelligence information; but his reports were generally complete and accurate and showed a sound understanding of operational reporting requirements.

Mr. Flores is a personable and intelligent individual who got along very well with his colleagues and with the instructors. With his excellent attitude and strong desire for a career in the Clandestine Services together with his willingness to work hard, Mr. Flores should have little difficulty in developing into an effective case officer as he gets greater experience.

FOR THE DIRECTOR OF TRAINING:



Chief Instructor

23 August 1968  
Date

S-E-C-H-E-T

TRAINING REPORT

Operations Course, Phase II-3-68  
(416 hours, full-time)

4 March - 3 May 1968  
(Date)

Student : FLORES, Daniel

Office : CTP/OTR

Year of Birth:

Service Designation: SJ

Grade : GS-07

No. of Students:  Began;  Finished

EOD : March 1962

COURSE OBJECTIVES:

The course is designed to prepare junior clandestine services officers for [redacted] related to the [redacted] of [redacted]. Upon completion of training, the officer will be capable of developing and implementing actions which will contribute to the elimination of [redacted] in the [redacted] of the world in furtherance of U.S. policy. He shall also be capable of developing plans for the [redacted] of [redacted] in support of United States [redacted] in [redacted] and will be able to plan for the use of [redacted] and [redacted] operations in direct support of other intelligence activities.

ACHIEVEMENT RECORD:

The performance rating and narrative comments below are derived from a synthesis of all observations and evaluations submitted on each trainee by the instructor staff. Student rating is indicated by the asterisk.

INCOMPLETE 0

ADEQUATE 0

PROFICIENT \* 48

STRONG 12

NARRATIVE COMMENTS:

Mr. Flores is a self-sufficient, steady worker, who demonstrated an excellent ability to adapt himself to the various training situations. His proficient performance during Operations Course, Phase II-3-68 did not fluctuate appreciably from beginning to end.

Mr. Flores was always mentally alert, receptive to instruction and responsive to instructional exercises. He cheerfully accepted all responsibilities, consistently produced satisfactory results, and appeared to demonstrate a sense of pride in his accomplishments. His conscientious effort, sincerity, and cooperative attitude enabled him to develop a sound working relationship with his colleagues.

Continued on Page 2

S-E-C-R-E-T

TRAINING REPORT

Operations Course, Phase II-3-68  
(416 hours, full-time)

4 March - 3 May 1968

Student : FLORES, Daniel

Office : CTP/OTR

Service Designation: SJ

NARRATIVE COMMENTS (Continued)

Of noteworthy mention was Mr. Flores' pleasant, industrious performance throughout the [redacted]. He established a cheerful environment for his colleagues and completed assigned responsibilities with enthusiasm, determination and cooperation. His sustained high-level performance and ability to adapt to the [redacted] earned him the respect and appreciation of his classmates.

The degree of performance attained in the course indicates Mr. Flores has gained a sound familiarization of the [redacted] activities, responsibilities, skills, and concepts.

FOR THE DIRECTOR OF TRAINING:

[redacted]  
Chief Instructor, Operations Course, Phase II

S E C R E T

TRAINING REPORT

NAME OF TRAINEE:	Flores, Daniel	COURSE:	CS RECORDS I & CS RECORDS II (Biographic Research)
DOB:	<input type="text"/>	SD:	SJ
OFFICE:	CTP	GS:	07
		DATE :	9 - 16 May 1968
		HOURS :	30 - part time

OBJECTIVES

1. To provide briefing in the CS requirement for biographic research, the importance of this research in the investigative process, and in the importance of the role of the biographic researcher.
2. To provide instruction in the nature, content and means of access to repositories of biographic information in the CS and other elements of the Agency and the community.
3. To introduce the concept of research and investigation and the processes involved therein, and to provide practical work in research as done at headquarters.
4. To alert the students to the nature of analysis in producing finished reports of biographic research.
5. To provide practice in writing the report of biographic research.

METHOD OF INSTRUCTION

The course is presented by means of lecture, discussion and demonstration. More than fifty percent of the class time is devoted to an exercise in biographic research, an exercise in analysis of the materials recovered, and preparation of a report of the research.

ADJECTIVAL RATINGS USED IN THE TRAINING REPORT

EXCELLENT      Student demonstrated unusual competence in achieving the course objectives. His understanding of the course content was unusually thorough and perceptive. Where skills were taught, he demonstrated particular facility in their use.

SATISFACTORY      Student's achievement of the course objectives was competent. He demonstrated good understanding of the course content. Where skills were taught, he demonstrated basic facility in their use.

UNSATISFACTORY      Student did not demonstrate adequate competence. Although he may have made some progress, he fell short of the minimum standards for achievement of the course objectives.

S E C R E T

S E C R E T

NARRATIVE RATING OF ACHIEVEMENT:

Mr. Flores showed considerable ability and experience in his handling of the practical problem. He should have no trouble in doing work of this kind with a minimum of supervision.

Overall affectival rating of achievement:

Satisfactory ✓

Overall affectival ratings of achievement of all employees in the course:

EXCELLENT: 2 SATISFACTORY: 14 UNSATISFACTORY:

Attendance at this course does not provide the student with operational knowledge and background sufficient to qualify him as an independent researcher, capable of making operational judgments.

NOTE: CS Records I (Introduction to Records) is a prerequisite for this course.

FOR THE DIRECTOR OF TRAINING:

24 MAY 1968

Date

Chief Instructor

## SECRET

(When Filled In)

TRAINING REPORT INTELLIGENCE TECHNIQUES COURSE (120 Hours)			COURSE NO.	NO. STUDENTS	DATE OF COURSE
			3-68	46	29 Jan - 13 Feb 1968
IDENTIFYING INFORMATION					
NAME OF STUDENT	YOB	EDD DATE	OFFICE	GS	SD
FLORES, Daniel	[ ]	Mar 1962	CTP	07	SJ
KEY TO RATINGS					
<b>W - Weak</b>	Ranges from inadequate to less than satisfactory.				
<b>A - Adequate</b>	Has achieved the basic level required. Satisfactory, characterized neither by deficiency nor excellence.				
<b>P - Proficient</b>	More than satisfactory. Has acquired a solid beginner's proficiency.				
<b>S - Strong</b>	Exceptional proficiency. Characterized by thoroughness, initiative, originality, and an exceptional student understanding of the work involved in intelligence production.				
<b>O - Outstanding</b>	Performance is so exceptional in relation to requirements and in comparison to the performance of others doing similar work as to warrant special recognition.				
EVALUATION OF PERFORMANCE IN SKILLS					
BRIEFING	RATING  P	WRITING	RATING  A+	ANALYSIS	RATING  P
OVER-ALL PERFORMANCE EVALUATION					
The RATING LETTER reflects the over-all performance of the student in the course and is thus a measure of the extent to which the student possesses the skills and techniques required in the production of finished intelligence. The rating is not necessarily arrived at by mathematically averaging in the skills ratings, but takes into consideration any outstanding strengths or weaknesses that should be reflected in an evaluation of the performance of the student as a whole. The RATING LETTER is a consensus of the view of the faculty.					RATING  P-
REPORT OF OBSERVATIONS, JUDGMENTS AND IMPRESSIONS					
This is a general, unspecific, narrative report of observations, judgments, and impressions. It includes intangible factors such as the student's attitude, cooperativeness, attentiveness, maturity, and judgment. It also includes the general impression the student has made on the faculty. This report will not be included unless the instructors believe that it would add something to the previous evaluation of performance in skills as well as to the evaluation of the OVER-ALL PERFORMANCE of the student.					
FOR THE DIRECTOR OF TRAINING:	[ ]			DATE	[ ]
CIEP INTELLIGENCE PRODUCTION FACULTY INTELLIGENCE SCHOOL					

S-E-C-R-E-T

PERFORMANCE RECORD

The [redacted]

CT Class U P-1 "P" 10/17

Course Description

A. Statement of Objectives

- 1.
- 2.

B. Course Method

1. Approximately one-half of the course is devoted to lectures, one-fourth to seminars, exercises and demonstrations, and one-fourth to individual study.
2. Student achievement is judged on the basis of performance in one written examination and participation in seminars and exercises.

NAME Flynn, Paul L

Written Work

Examination

By Project

Oral Work

Seminars, Exercises

By Project

Comment:

CROUP I  
Excluded from automatic  
downgrading and  
declassification

S-E-C-R-E-T

TRAINING REPORT

OPERATIONS FAMILIARIZATION COURSE No. 2-68      2 Jan. - 26 Jan. 1968  
(192 hours, full-time)      (Date)

STUDENT : FLORES, Daniel

OFFICE : CIP

YEAR OF BIRTH: [REDACTED]

SERVICE DESIGNATION: CJ

GRADE : GS-07

NUMBER OF STUDENTS : [REDACTED] Began

END DATE : March 1968

[REDACTED] Finished

COURSE OBJECTIVE AND CONTENT

The Operations Familiarization Course is a four-week course designed to provide the student with an understanding of the Clandestine Services programs, operational methods and reporting techniques. Special emphasis is given the basic elements of [REDACTED]

METHODS

The instructional methods used included class discussions, lectures, films, demonstrations, practical exercises and case studies. Practical exercises were [REDACTED]

The operational programs of various Clandestine Services Divisions were discussed by representatives of the respective Headquarters components.

EVALUATION OF PERFORMANCE

The student's rating is based on understanding of the material presented as demonstrated by his participation in class discussions, the preparation of intelligence and operational reports, the application of operational principles in the practical exercises and the grade received on a comprehensive written examination given in the final week of the course which covered all areas of course content. Other factors considered in determining the final rating were the student's interest, attitude and preparation for assignments. The number of students receiving each adjectival rating on overall course performance is shown below. This student's rating is indicated by an asterisk. Explanatory narrative comments are included with a rating of ADEQUATE or STRONG. When considered pertinent by the training staff, comments may also be included with a PROFICIENT (average) rating.

UNSATISFACTORY    ADEQUATE

\* PROFICIENT

STRONG

✓ Mr. Flores' overall performance in the course was at the solid proficient level. It should be noted that he demonstrated a particularly good attitude throughout the course. He took full advantage of the training offered to increase his knowledge of the Clandestine Services.

FOR THE DIRECTOR OF TRAINING

9 Feb. 1968

S-3-C-S-4-7

S-E-C-R-E-T

ORIENTATION TO INTELLIGENCE FOR CT'S  
(Class of December 1967)

STUDENT : Daniel FLORES

DURATION: 11-22 December 1967  
(30 hours, full time)

YEAR OF BIRTH:

OFFICE : CT

GRADE : GS-07

SERVICE DESIGNATION: SJ

EOD : March 1962

NUMBER OF STUDENTS :

COURSE OBJECTIVES - CONTENT AND METHODS

In the Orientation to Intelligence Course the objectives are: (1) to instruct the student in the basic concepts and terminology of intelligence; (2) to describe the history of U.S. Intelligence and the current role of intelligence in the national security structure; (3) to outline the composition and mission of the intelligence community, noting the Agency's significant role therein; (4) to define the mission of CIA in supporting the DCI and to identify the functions of the Agency's major components, particularly in the collection, production, and dissemination of intelligence; and (5) to identify and discuss major problems facing the Agency. The area surveys and "Articulating the United States" elements of the course are designed to introduce the students briefly to some of the intelligence problems presented by major regions of the free world and to stimulate thought about the American way of life and its relationship to these areas.

Instructional techniques include lectures given by members of the Orientation and Briefing Faculty, guest speakers from Agency components, seminars, directed reading, review exercises, training films, and intelligence exhibits.

ACHIEVEMENT RECORD

The individual student evaluation is based on his score achieved on a written examination given at the conclusion of the course. This test, consisting of 100 items, covered all major aspects of the course content. The rating assigned to this student is:

PROFICIENT

The evaluation system used was as follows:

O = Outstanding	- 0-3 wrong
S = Strong	- 4-8 wrong
P = Proficient	- 9-15 wrong
A = Adequate	- 16-25 wrong
W = Weak	- 26+ wrong

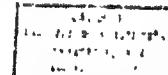
FOR THE DIRECTOR OF TRAINING:

Chief, Orientation & Briefing Faculty

8 January 1968

Date

S-E-C-R-E-T



~~CONFIDENTIAL~~

26 October 1967

MEMORANDUM FOR: Daniel Flores

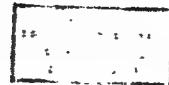
THROUGH : Executive Secretary  
C3CT Selection Board

SUBJECT : Application for Career Training Program

1. I am pleased to inform you that you have been accepted for the Career Training Program. Let me congratulate you and wish you the maximum profit and pleasure from your proposed training.
2. You will remain with your present Component until the beginning of the next Integrated Training Program, to begin 11 December. At that time you will be reassigned to the CTP T/O where you will remain until your training has been completed.
3. Should you have any further questions, do not hesitate to call on the Program Officers.

[Redacted]  
Chief, CTP

~~CONFIDENTIAL~~



SECRET

Then  $\mathcal{F}$  (last)

MILITARY STATUS QUESTIONNAIRE (READ INSTRUCTIONS ON REVERSE SIDE)						DO NOT WRITE IN SPACES BELOW			
1. THIS DATE (Month-Year) <b>MARCH 18, 1962</b>						1-6. SERIAL NUMBER <b>606103</b>			
2. NAME (Last-First-Middle) <b>FACKES, RONALD G.</b>						7-24. NAME 			
3. DATE OF BIRTH (Month-Year) 						4. SEX (1) MALE      (2) FEMALE 			
5. OFFICE TO WHICH ASSIGNED <b>DPP/OPSER/RC</b>						6. SCHEDULE AND GRADE <b>GS-04</b>			
7. SUBJECT TO CURRENT DRAFT YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			8. INDICATE DRAFTY CLASSIFICATION, IF ANY 			25-29. DRAFT <b>1835</b>		29-33. SER. <b>1</b>	
VETERANS COMPLETE THE FOLLOWING						30-31. OFFICE CODE <b>309</b>		32-34. SCHD. <b>G.S.C.4</b>	
9. BRANCH OF SERVICE ON SEPARATION (Check one) (1) ARMY <input checked="" type="checkbox"/> (2) MARINE <input type="checkbox"/> (3) COAST GUARD <input type="checkbox"/> (2) NAVY <input type="checkbox"/> (4) AIR FORCE <input type="checkbox"/>						10. MIL. GRADE ON SEPARATION <b>E4</b> 10A. YRS/MOS OF ACTIVE SERVICE <b>14/05</b>			
11. STATUS AT TIME OF SEPARATION (Check one) <input checked="" type="checkbox"/> (1) REGULAR      (2) RESERVE      (3) DRAFTER      (4) OTHER (Specify) 						11. STATUS AT SEPARATION 			
12. TYPE OF SEPARATION (Check one) <input checked="" type="checkbox"/> (1) RELEASED TO INACTIVE DUTY (2) HONORABLE DISCHARGE (3) RETIRED<20 (Honor) YRS. SERVICE (4) RETIRED<LESS THAN 20 YRS. SERVICE						13. PLEASE NOTE  ALTHOUGH YOU MAY HAVE A SERVICE CONNECTED DISABILITY, DO NOT CHECK THE BOX "RETIRED-SERVICE CONNECTED DISABILITY" UNLESS YOU WERE ACTUALLY RETIRED FOR THIS REASON. IF OTHERWISE, CHECK "HONORABLE DISCHARGE" OR "RELEASED TO INACTIVE DUTY" AS APPROPRIATE, EVEN THOUGH YOU MAY BE DRAWING A DISABILITY ALLOWANCE OR COMPENSATION.			
14. ORIGINAL ENTRY DATE IN ARMED SERVICES 						14. TYPE OF SEPARATION (A-less than 8 yrs; B-8 yrs or more)  1A      2A      3A      4A 5A      6A      7A 8A      9A      10A 11A     12A     13A     14A 15A     16A     17A     18A 19A     20A     21A     22A 23A     24A     25A     26A 27A     28A     29A     30A 31A     32A     33A     34A			
15. MEMBERS OF RESERVE FORCES COMPLETE THE FOLLOWING						15. BRANCH SERVICE 			
16. RESERVE BRANCH OR SERVICE 			17. ORIGINAL ENTRY DATE IN ARMED SERVICES 			18. BRANCH SERVICE 		46-49. ENTRY DATE 	
19. SERVICE SERIAL NO. 			20. MIL. GRADE 			21. RESERVE CATEGORY (Check one) (1) READY      (2) STANDBY      (3) RETINED 		50-59. SERV. SER. NO. 	
22. EXPIRATION DATE OF APPOINTMENT OR ENLISTMENT (Month and year) 			23. MOBILIZATION ASSIGNMENT 			60-64. MOS. AFSC. ETC. 		50-59. SERV. SER. NO. 	
24. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED 						65-68. MIL. GRADE 			
25. COMMENTS 						69. CATEGORY 			
26. MOBILIZATION CATEGORY 						70. MOBILIZATION ASSIGNMENT 			
27. ASSIGNMENT UNIT 						71. EXPIRATION DATE 			

CIA INTERNAL USE ONLY  
(Classify When Filled In)

OUTSIDE ACTIVITY APPROVAL REQUEST			
REF ID: A0-7 BEFORE SUBMITTING TO FAR AN ORIGINAL AND 3 COPIES OF THIS FORM			
TO :	DIRECTOR OF SECURITY; ATTN: EMPLOYEE ACTIVITY BRANCH	DATE	16 April 1962
THROUGH:	(Operating officer, administrative and/or security officer)		
	<input type="text"/> Security Officer, RID		
FROM :	NAME AND GRADE OF EMPLOYEE (Print or Type)	COMPONENT	ROOM NO. AND BLDG.
	FLETCHER, Daniel GS-5b	EDP/OPSER/RID/RB/IN	X B 4003
3. DESCRIPTION OF OUTSIDE ACTIVITY FOR WHICH APPROVAL IS REQUESTED			
Bartender			
4. FULL NAMES OF ORGANIZATION AND/OR PERSONS INVOLVED			
Bartenders Union Local 014 75		Mr.	<input type="text"/>
5. DATE(S) OF PARTICIPATION AND LOCALE OF ACTIVITY			
On call different days of the week. 914 P Street, N. W. Washington, D. C.			
6. REMARKS			
In engaging in the requested activity I will make no reference to, or discuss my CIA assignments or duties nor will I make reference to or discuss my CIA employment except as authorized by Headquarters Regulation 10-7.			
<i>John M. Fletcher</i> SIGNATURE OF REQUESTING EMPLOYEE			
7. CONCURRENCE AND/OR APPROVAL WITHIN OPERATING OFFICE			
(signed) John M. Wiggleworth  <i>John M. Wiggleworth</i> Chief, RID/ADMIN			
FOR COMPLETION BY EMPLOYEE ACTIVITY BRANCH AND RETURN OF ORIGINAL TO EMPLOYEE			
<i>20 Apr 62</i> <i>W.M. Fletcher</i>			

879 - 6 PREVIOUS  
879 - 6

CIA INTERNAL USE ONLY (D-30)

Standard Form No. 2809 CHARTER LIST FORM (GAR) 1964		HEALTH BENEFITS REGISTRATION FORM FEDERAL EMPLOYEES HEALTH BENEFITS ACT OF 1959					4536490	
(Report Inc.) Name or name of last change Date of last change Name of employee Employee number Employer identification number Address of employer		Date of birth Month Year Day		Date of birth Month Year Day		Are you now married? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
<b>PART A</b> ALL WHO REGISTER MUST FILE IN THIS PART		NAME (LAST, FIRST, MIDDLE) <i>Flora L. ...</i>		STATE AND ZIP NUMBER <i>FL 18111-1111</i>		SEX MALE <input type="checkbox"/> FEMALE <input checked="" type="checkbox"/>		
4. YOUR MAILING ADDRESS <i>11811-1111</i>		5. CITY AND STATE <i>FLORIDA</i>		6. Are you covered by, or is any family member covered by, or enrolling in a plan under the Federal Employees Health Benefits Act of 1959 (through the entire year of another United States or District of Columbia Government agency if unemployed)? <i>No</i>		7. Please mark <input checked="" type="checkbox"/> in proper box to show your annual basic salary range.  ANNUAL SALARY <i>\$10000-\$15000</i> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> \$10000-\$15000 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> \$10000-\$15000 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		
<b>PART B</b> FILE IN THIS PART IF YOU WISH TO EN- ROLL IN A HEALTH BENEFITS PLAN		1. I elect to enroll in a health benefits plan as shown below. I authorize deductions to be made from my salary, compensation, or com- pensation and allowances to cover my share of the cost of the enrollment. Copy the information requested below from inside cover of brochure of the plan you select.		NAME OF PLAN <i>Health Insurance Plan</i>		OPTIONAL DATE OF TODAY <i>11/01/11</i> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> THE GREAT SOCIETY <i>11/1/11</i> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>		
		2. In space below list all eligible family members (not exceptions). List your wife or husband first, then your unmarried child or under age 19, including legally adopted children, and stepchildren and illegitimate children who live with you in a regular parent-child relationship. Include also any unmarried child over 19 who became disabled before age 19 and who, because of the disability, is incapable of self-support. (Attach a doctor's certificate for a disabled child age 19 or over.)		3. NAMES OF FAMILY MEMBERS <i>Wife or Husband: <i>Lorraine</i> 11/1/11</i>		4. NAMES OF FAMILY MEMBERS <i>11/1/11</i>		
				5. DATES OF BIRTH <i>11/1/11</i>		6. DATES OF BIRTH <i>11/1/11</i>		
				7. DATES OF BIRTH <i>11/1/11</i>		8. DATES OF BIRTH <i>11/1/11</i>		
				9. DATES OF BIRTH <i>11/1/11</i>		10. DATES OF BIRTH <i>11/1/11</i>		
<b>THIS PART MUST ALSO BE SUBMITTED IF YOU CHANGE YOUR ENROLLMENT</b>		11. Does the family listed above include a husband who is incapable of self-support because of mental or physical disability which can be expected to continue for more than one year? (If answer is yes attach a doctor's certificate.) <i>No</i>		12. FOR ITEM 2, WHICH ONE APPLIES AND ALSO FOR ITEM 3 1. I elect to enroll in any plan under the Health Benefits Act. <input type="checkbox"/>		13. The reason for my election is (Please mark <input checked="" type="checkbox"/> in proper box). 1. I am covered by a plan under the Health Benefits Act through the enrollment of my husband, wife, or parent. <input type="checkbox"/> 2. I am covered by a health insurance plan which is not under the Health Benefits Act. <input type="checkbox"/> 3. Any other reason. <input type="checkbox"/>		
<b>PART C</b> FILE IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT		14. I elect to change my enrollment as shown by the event, event number and other information in Part B. 1. Enrollment certificate number of present plan <i>_____</i>		15. Date of event which permits change <i>_____</i>		16. Date of event which permits change <i>_____</i>		
<b>PART D</b> FILE IN THIS PART IF YOU WISH TO CHANGE YOUR ENROLLMENT		17. Signature of employee <i>Janet L. ...</i>				18. WARNING.—Any intentional false statement in this application or willful misrepresentation relating thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001)		
<b>PART E</b> FILE WHO REGISTERED MUST FILE IN THIS PART		19. NAME AND ADDRESS OF EMPLOYER'S OFFICE <i>U.S. AIR FORCE</i>		20. DATE RECEIVED IN EMPLOYER'S OFFICE <i>11/01/11</i>		21. EFFECTIVE DATE OF ELECTION <i>11/01/11</i>		
<b>PART F</b> TO BE COMPLETED BY AGENCY		22. PAYROLL OFFICE AND DATE <i>11/01/11</i>		23. PAYROLL OFFICE AND DATE <i>11/01/11</i>		24. PAYROLL OFFICE AND DATE <i>11/01/11</i>		
<b>REMARKS</b> Use one line or less than one page								

**CONFIDENTIAL**,  
(when filled in)

**MEMORANDUM OF UNDERSTANDING**

I hereby acknowledge that I have read and understand the contents  
of Handbook 20-4, Employee Conduct, dated 29 August 1961.

  
Signature

18 August 1962  
Date

**CONFIDENTIAL**

## APPOINTMENT AFFIDAVITS

**IMPORTANT.** - Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

WASHINGTON, D. C.

(Bureau or division)

(Place of employment)

I, FLORES, DANIEL, do solemnly swear (or affirm) that—

### A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

### B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

### C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

### D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

11 March 1962

(Date of entrance on duty)

*Daniel Flores*

(Signature of appointee)

Subscribed and sworn before me this 12th day of March, A. D. 1962.

at Washington,  
(City)

D. C.

(State)

[SEAL]

*Charles L. Clark*  
(Signature of witness)  
Appointment Clerk

(Title)

NOTE -- The oath of office must be administered by a person appointed in 5 U. S. C. 10 or by a person designated to administer oaths under Section 20. As of June 18, 1947, 5 U. S. C. 10a lists a Notary Public. The date of expiration of his commission should be shown.

**DECLARATION OF APPOINTEE**

This form is to be completed before entrance on duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

PRESENT ADDRESS - Street and number, city and State		UNSTRUCTURED S, D.C.		
		(B) PLACE OF BIRTH (City and State or city and foreign country)		
		SAN ANTONIO, TEXAS		
(A) IN CASE OF EMERGENCY, PLEASE NOTIFY		(B) RELATIONSHIP	(C) STREET AND NUMBER, CITY AND STATE	(D) TELEPHONE NO
MRS. BRIGGS TROTTER		WIFE	18 W. NASH, S, D.C.	WS-7-54644
8. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 12.				
NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR. PIED (Check one)
		1. ....		
		2. ....		
		3. ....		
		4. ....		
		5. ....		
		6. ....		
		7. ....		
		8. ....		

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN.

YES NO INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN YES NO

- B (4) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA OR (B) AS A  
B (5) CITIZEN OF ANOTHER COUNTRY DO YOU OWE ALLEGIANCE TO THE UNITED  
STATES OF AMERICA?**

**B. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR  
MUNICIPALITY?**

**If your answer is "Yes," give details in Item 19.**

**B (1) IF YOU ARE AN OFFICIAL OR EMPLOYEE OF THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT PLAN OR PAYMENT PLAN OR OTHER COMPENSATION FOR MILITARY OR PAYMENT  
SERVICES?**

**If your answer is "Yes," give details in Item 19.**

**B (2) SINCE YOU FILED APPLICATION NO. 11010 IN THIS APPOINTMENT, HAVE YOU  
MADE ANY PAYMENT TO THE UNITED STATES OR DISTRICT OF COLUMBIA  
GOVERNMENT, EXCEPT FOR AN VARIATION OF B (1) OR LOCAL LABOR  
STAFFING CHARGE OR LOCAL LABOR REGULATORY CHARGE, OR LOCAL  
BAPTIST LOCAL TRAFFIC TAXES, PLUS PAYMENTS IN LIEU OF LOCAL DATA  
INVOICES? ALL OTHER EXPENSES MUST BE INCLUDED EVEN IF THEY  
ARE INCURRED.**

**If your answer is "Yes," give in Item 20 the exact value  
(b) approximate date (b), charge (b), place, (b) action taken.**

**B (3) SINCE YOU FILED APPLICATION NO. 11010 IN THIS APPOINTMENT, HAVE  
YOU BEEN BREACHED BY THE U.S. STATE DEPARTMENT OR THE TRAVEL  
REGULATORY BOARD OR RECEIVED ONE SPECIAL APPROVAL NUMBER?**

10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE  
UNDER THE FEDERAL EMPLOYEES GROUP LIFE INSURANCE ACT?

(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR  
REVOKED?

11. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT,  
A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE:  
    (1) YOUR CONDUCT WAS NOT SATISFACTORY?  
    (2) YOUR WORK WAS NOT SATISFACTORY?  
B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT:  
    (1) YOUR CONDUCT WAS NOT SATISFACTORY?  
    (2) YOUR WORK WAS NOT SATISFACTORY?  
C. HAVE YOU BEEN DISMISSED FROM THE ARMED SERVICES UNDER  
OTHER THAN HONORABLE CONDITIONS?

If your answer to A, B, or C is "Yes," give details in  
Item 12, as far as you can remember, including the

Branch debenture in item 12

**NOTIFICATION TO APPOINTING OFFICER.** You will determine that the appointment would be in conformance with the Civil Service Act, particularly Section Nine and Regulation, and notify the officer preferring to appointment.

It has been proposed to establish the Institute of Marine, Maritime and Coastal Research at Dredge Bay, Williamson's Bay and near Head of Towns. After the research identity of the proposed research institution, there will be organization and handover fitting the organization and its office room and workspace. This is to facilitate the research activities of the Institute.

STANDARD FORM 144  
REVISED SEPTEMBER 1964  
U. S. CIVIL SERVICE COMMISSION  
FPM CHAPTERS VI, VII, AND XI

STATEMENT OF PRIOR FEDERAL CIVILIAN AND MILITARY SERVICE  
AND DETERMINATION OF COMPETITIVE STATUS

IMPORTANT: The information on this form will be used (1) in determining creditable service for leave purposes and retention credits for reduction in force, and (2) in regarding agency determination of competitive status. The employee should complete Part I and the Personnel Office should complete Parts II through V.

PART I.—EMPLOYEE'S STATEMENT

1. NAME (Last, first, middle initial)

FLOREN, DANIEL

2. DATE OF BIRTH

--	--	--	--	--	--	--	--

3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service.)

NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	

4. LIST PERIODS OF ACTIVE SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO ACTIVE MILITARY SERVICE, WRITE "NONE."

BRANCH	FROM—			TO—			DISCHARGE (Hon or dishon?)
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	
United States Air Force C-47 P/S.	1959	July	25	1961	July	25	Honorably

5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR?  YES  NO  
IF ANSWER IS "YES," LIST FOLLOWING INFORMATION:

TYPE IF KNOWN (LWOP, Full, Susp, AWOL, Mar Mar)	FROM—			TO—			TOTAL		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS

6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS?

YES  NO

(If answer is "Yes," in what agency were you employed at the time status was acquired?)

7. ARE YOU

- A. THE SPOUSE OF A DISABLED VETERAN?  YES  NO  
B. THE BROTHER OF A DECEASED OR DISABLED VETERAN?  YES  NO  
C. THE UNMARRIED SPOUSE OF A VETERAN?  YES  NO

8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS

I swear (or affirm) that the above statements are true to the best of my knowledge and belief.

12 March 1962  
(Signature)

Daniel Floren  
(Signature)

Swear and return to before me on this 12 day of April 1962 at Washington, D.C. (City, State)

B E A L

John J. Bell  
(Signature)

NOTE: If oath is taken before a Notary Public, the date of separation of his Commission should be shown.

INSTRUCTIONS: Fill this form on the permanent side of the employee's official personnel folder immediately before or after the personnel action is taken.

(UVSR)

## CONFIDENTIAL

(When Filled In)

Complete in duplicate. The data recorded on this form is essential in determining travel expenses allowable in connection with leave or government expense, overseas duty, return to residence upon separation, and for providing current residence and dependency information required in the event of an employee emergency. The original of this form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) <i>GEORGES</i>	(First) <i>DANIEL</i>	(Middle) <i>C.</i>	SOCIAL SECURITY NUMBER
RESIDENCE DATA			
PLACE OF RESIDENCE WHEN INITIALLY APPOINTED <i>WASH. D.C.</i>	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) <i>WASH. D.C.</i>		
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <i>WASH. D.C.</i>	HOME LEAVE RESIDENCE		
MARITAL STATUS (Check one)			
SINGLE	MARRIED	SEPARATED	DIVORCED
IF MARRIED, PLACE OF MARRIAGE <i>RICHMOND, VA.</i>		WIDOWED	
IF DIVORCED, PLACE OF DIVORCE DECREE <i>WASH. D.C.</i>		ANNULLED	
DATE OF MARRIAGE <i>1961, 14, 1961</i>		DATE OF DECREE	
IF WIDOWED, PLACE SPOUSE DIED		DATE SPOUSE DIED	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)			
MEMBERS OF FAMILY			
NAME OF CHILDREN	ADDRESS <i>1101 1/2 E. 14TH ST., APT. 202, WASHINGTON, D.C.</i>	SEX <i>M</i>	TELEPHONE NO. <i>265-8322</i>
NAME OF FATHER (Or male guardian)	ADDRESS <i>5414 1/2 E. 14TH ST., WASHINGTON, D.C.</i>	SEX <i>M</i>	TELEPHONE NO. <i>265-8322</i>
NAME OF MOTHER (Or female guardian)	ADDRESS <i>5414 1/2 E. 14TH ST., WASHINGTON, D.C.</i>	SEX <i>F</i>	TELEPHONE NO. <i>265-8322</i>
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.			
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Ms.) <i>GEORGES</i>	RELATIONSHIP <i>WIFE</i>	HOME TELEPHONE NUMBER <i>265-5322</i>	
HOME ADDRESS (No., Street, City, Zone, State) <i>1101 1/2 E. 14TH ST., WASHINGTON, D.C.</i>	BUSINESS TELEPHONE & EXTENSION <i>265-7-5444</i>		
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE <i>WASHINGTON, D.C.</i>			
IS THE INDIVIDUAL NAMED ABOVE TELLING OF YOUR AGENT AFFILIATION? (If "No" give name and address of organization if any who can make such decisions in case of emergency.)			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY SUBSTITUTE? (If answer is "No" explain why in Item 8.)			
The persons named in item 3 above may also be notified in case of emergency. If such notification is not desirable because of health or other reasons, please so state on item 6 on the reverse side of this form.			
CONFIDENTIAL AND RESTRICTED INFORMATION			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

**CONFIDENTIAL**  
*(When Filled In)*

## VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability, death, and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

**UNITS ARE CARRIED.**  
VENTURE TRUST Co., WASH. D.C. - DANIEL ed [REDACTED] FEB 10, 1953  
BANK OF CALIFORNIA, PORTLAND ORE, DANIEL ed [REDACTED] CLEVELAND

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES  NO. (If "Yes" where is document located?)

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. (If "Yes", who possess the power of attorney?)

**ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS**

• www.yesky.com •

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Frank B. 13 512

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REQUEST FOR MEDICAL EVALUATION				DATE	REQUEST DATE	APPLICANT HAS APPLIED PREVIOUSLY	
				12 Sept 77	REB	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
NAME (Last, First, Middle) Alvarez, Daniel S GRADE				16 SOCIAL SECURITY NO.	17 DEPARTMENT	18 EMPLOYEE	
13 DEPARTMENT CODE: DDO/LA				18 DEPARTMENT	19 DEPARTMENT	18 DEPARTMENT	
13 DEPENDENT NAME (Last, First, Middle)				14 SURNAMES	15 BORN (MM/YY)	16 RELATIONSHIP	
						F wife yes	
						T dau yes	
20 REQUESTED ACTION (Rate Prior to Action if applicable)				STO STATION NUMBER			
APPLICANT		TIME OF EMPLOYMENT		STATION	STO STATION NUMBER	NO OF PARENTS TO ACCOMPANY FOR RETURN	
ASSIGNMENTS		US PCS			14 Oct 77	2	
		US TOY				Ops Officer	
		US RETURNEE US TOY STANDBY US PLANNING		FITNESS FOR DUTY RETURN TO DUTY SPECIAL TRAINING			
SEPARATION		RETIREMENT		MDR/CARDS	MDR/CSC		
ROUTINE		REGULAR ANNUAL		EXECUTIVE ANNUAL	MPT/PHE		
21 COMMENTS							
Assignment to [REDACTED] has been canceled, Subject is now being considered for [REDACTED]							
22 REQUESTING DIRECTORATE OFFICE DAY		23 ROOM/BLDG		24 EXTENSIONS		25 SIGNATURE OF REQUESTING OFFICER	
DDIV/LA/PERS		30333 JRS		5270			
FOR APPLICANTS				FOR OMS USE ONLY			
APPROVE PROCESSING FOR EOD HAND PENDING RECEIPT OF ADDITIONAL MEDICAL INFORMATION, COMB EXP AND RPT				COMMENTS			
REQUEST PRE-EXP MEDICAL EVALUATION				DATE			
OTHER INFORMATION				OMS SIGNATURE			
FOR OTHER ACTIONS				COMMENTS			
REQUESTED ACTION	QUAL	COND QUAL	DEFER	DISQUAL			
TIME RESPONSIBILITY CODE				EXAMINING FACILITY			
				DATE			
				OMS SIGNATURE			
CLASSIFIED BY: OMS - OMS MUST BE AT EVALUATED PRIOR TO FUTURE OF FCO.							
L-1 CH-1 TIE 26 OCT 1977							
LOW CLASSIFIED		INTERNAL USE ONLY		CONFIDENTIAL		SECRET	
						12 IMPRINTED BY	

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WISCONSIN STATE OPILOT

CLASSIFIED BY OS .CS MUST  
BE EVALUATED PRIOR TO  
FUTURE OS ISSUES.

THE  
6 OCT 1971

14045

SECRET  
When Filled In

REQUEST FOR MEDICAL EVALUATION			1 DATE OF REQUEST
2 NAME (Last, First, Middle) <b>Flores, Daniel</b>	3 DUTY: OTR/FTD/UTB	3 POSITION TITLE <b>Instructor</b>	4 GRADE <b>GS-12</b>
5 OFFICE DIVISION BRANCH		6 EMPLOYEE'S EXT.	<b>5191</b>
7 PURPOSE OF EVALUATION			
<input type="checkbox"/> PRE-EMPLOYMENT		<input type="checkbox"/> HQDG/TDY	
<input type="checkbox"/> ENTRANCE ON DUTY		<input type="checkbox"/> OVERSEAS ASSIGNMENT	
<input checked="" type="checkbox"/> TDY STANDBY		8 TO	
<input type="checkbox"/> SPECIAL TRAINING		STATION	
<input type="checkbox"/> ANNUAL		TDY OR PCB	
<input type="checkbox"/> RETURN TO DUTY		TYPE OF COVER	
<input type="checkbox"/> FITNESS FOR DUTY		NO. OF DEPENDENTS TO ACCOMPANY	
<input type="checkbox"/> MEDICAL RETIREMENT		NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED	
		<input type="checkbox"/> RETURN FROM OVERSEAS	
		9. REQUESTING OFFICER	
8 OVERSEAS PLANNING EVALUATION (One block must be checked)		SIGNATURE	
<input type="checkbox"/> YES		ADDRESS & BUILDING	
<input type="checkbox"/> NO		EXV. <b>6057 HQS</b>	

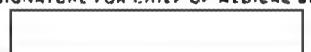
10 COMMENTS	
Destination: World-Wide	
11 REPORT OF EVALUATION	
Qualified for TDY Standby until 1 August 1978.	
DATE <b>31 August 1976</b>	SIGNATURE FOR CHIEF OF MEDICAL STAFF <b>OHS/PEO</b>

SECRET  
(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST
2. NAME (First, First, Middle) <b>Flores, Daniel</b>	3. POSITION TITLE <b>Instructor</b>	4. GRADE <b>GS-13</b>
5. OFFICE DIVISION BRANCH <b>OTR/FTD/OTB</b>	6. EMPLOYEE'S EAT. <b>6191</b>	
7. PURPOSE OF EVALUATION		
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> HOUS/TDY		
<input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> OVERSEAS ASSIGNMENT		
<input checked="" type="checkbox"/> TDY STANDBY		
<input type="checkbox"/> SPECIAL TRAINING		
<input type="checkbox"/> ANNUAL		
<input type="checkbox"/> RETURN TO DUTY		
<input type="checkbox"/> FITNESS FOR DUTY		
<input type="checkbox"/> MEDICAL RETIREMENT		
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		
<input type="checkbox"/> YES		
<input type="checkbox"/> NO		
9. REQUESTING OFFICER SIGNATURE _____		
ROOM NO. & BUILDING <b>CDG57</b> EAT. <b>6191</b>		
10. COMMENTS		
11. REPORT OF EVALUATION <b>Qualified for TDY Standby until 1 August 1978.</b>		
DATE <b>31 August 1976</b>	SIGNATURE FOR CHIEF OF MEDICAL STAFF <b>CMS/PFO</b>	

SECRET

(When Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 10 Mar 75
2. NAME (Last, First, Middle) <b>Flores, Daniel (NMN)</b>	3. POSITION TITLE <b>Ops Officer</b>	4. GRADE <b>GS-12</b>
5. OFFICE DIVISION BRANCH <b>DDO/LA/COG</b>	6. EMPLOYEE'S EXT. <b>7265</b>	
7. PURPOSE OF EVALUATION		
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input checked="" type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		
<input type="checkbox"/> HQS/TDY <input type="checkbox"/> OVERSEAS ASSIGNMENT		
<b>TDY</b> <hr/> <b>STATION</b> <hr/> <b>TDY OR PCS</b> <hr/> <b>TYPE OF COVER</b> <hr/> <b>NO. OF DEPENDENTS TO ACCOMPANY</b> <hr/> <b>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</b>		
<input type="checkbox"/> RETURN FROM OVERSEAS		
<b>ETA</b> <hr/> <b>STATION</b> <hr/> <b>NO. OF DEP.'S</b>		
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		
<input type="checkbox"/> YES <input type="checkbox"/> NO		
9. REQUESTING OFFICER SIGNATURE  ROOM NO R BUILDING <b>3D5317 Hqs</b> EXT. <b>7431</b>		
10. COMMENTS		
11. REPORT OF EVALUATION		
Disposition deferred until subject fulfills medical requirements.		
DATE <b>1 April 1975</b>	SIGNATURE FOR CHIEF OF MEDICAL STAFF 	
OMS/Registrar		

## SECRET

1. NAME (Last, First, Middle)	2. DATE OF BIRTH	3. GRADE	
Flores, Daniel		GS-10	
4. OFFICE, DIVISION, BRANCH (or overseas station and existing cover if lateral assignment)	5. PRESENT POSITION	6. EMPLOYEE EXTENSION	
DDP/WHA	0376	7431	
7. PROPOSED STATION	8. PROPOSED POSITION (Title, Number, Grade)		
	Ops Officer/0636/GS-13		
9. TYPE OF COVER AT NEW STATION	10. ESTIMATED DATE OF DEPARTURE	11. NO. OF DEPENDENTS TO ACCOMPANY	
	Sept 71	two	
12. COMMENTS Vice: Please schedule appointments week of 31 May 1971/  Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the Station.			
13. DATE OF REQUEST	14. OFFICIAL	15. ROOM NUMBER AND BUILDING	16. EXTENSION
11 Mar 71		3D 5309	Hqs 7431
17. OFFICE OF MEDICAL SERVICES DISPOSITION			
18. OFFICE OF SECURITY DISPOSITION			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION 15 JUN 1971 QUALIFIED FOR PROPOSED LOCATION [Redacted] VERSEAS Chairman, Overseas Candidate Review Panel			
REQUEST FOR PCS OVERSEAS EVALUATION			

SECRET

Wings Parallel 301

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 11 Mar 71
2. NAME (Last, First, Middle) <b>Flores, Daniel (Dependents of)</b>		3. POSITION TITLE <b>Ops Officer</b>
4. GRADE <b>GS-10</b>		5. OFFICE DIVISION, BRANCH <b>DDP/EH/</b>
6. EMPLOYEE'S EXT. <b>7431</b>		
7. PURPOSE OF EVALUATION		
<p><input type="checkbox"/> PRE-EMPLOYMENT</p> <p><input type="checkbox"/> ENTRANCE ON DUTY</p> <p><input type="checkbox"/> TOE STANDBY</p> <p><input type="checkbox"/> SPECIAL TRAINING</p> <p><input type="checkbox"/> ANNUAL</p> <p><input type="checkbox"/> RETURN TO DUTY</p> <p><input type="checkbox"/> FITNESS FOR DUTY</p> <p><input type="checkbox"/> MEDICAL RETIREMENT</p>		
<p><input type="checkbox"/> HQS/TDY</p> <p><input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT</p>		
<b>ETD</b> <b>September 1971</b> <b>STATION</b> <b>TDY OR PCS</b> <b>PCB</b> <b>TYPE OF COVER</b> <b>NO OF DEPENDENTS TO ACCOMPANY</b> <b>TWO</b> <b>NO OF DEPENDENTS REPORTS OF MEDICAL HISTORY ATTACHED</b>		
<p><input type="checkbox"/> RETURN FROM OVERSEAS</p>		
<p><b>ETA</b>  <b>STATION</b>  <b>NO OF DEP'tS</b> </p>		
8. OVERSEAS PLANNING EVALUATION (One Mark must be checked)		9. REQUESTING OFFICER
<p><input checked="" type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>		<b>SIGNATURE</b> <div style="border: 1px solid black; width: 150px; height: 20px; margin-top: 5px;"></div>
		<b>ROOM NO &amp; BUILDING</b> <b>3D 5300 Bldg</b>
		<b>EXT.</b> <b>7431</b>
<b>10. COMMENTS</b> <div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>		
<b>Please schedule appointments week of 31 May 1971.</b>		
<b>11. REPORT OF EVALUATION</b> <b>Q</b> <b>U</b> <b>S</b> <b>US PCB</b>		
<b>16 87R</b>		
<div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>		
<b>12. SIGNATURE FOR CHIEF OF MEDICAL STAFF</b> <div style="border: 1px solid black; width: 150px; height: 20px; margin-bottom: 5px;"></div>		

SECRET

(If Not Filled In)

REQUEST FOR MEDICAL EVALUATION		1. DATE OF REQUEST 11 Mar 71
2. NAME (Last, First, Middle) <b>Flores, Daniel (Dependents of)</b>	3. POSITION/TITLE <b>Ops Officer</b>	4. GRADE <b>OS-10</b>
5. OFFICE DIVISION BRANCH <b>DDP/EH</b>	6. EMPLOYEE'S EXT. <b>7431</b>	
7. PURPOSE OF EVALUATION		
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TDY STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		
<input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT		
<b>STD</b> <b>September 1971</b> <b>STATION</b> <b>TDY OR PCS</b> <b>PCB</b> <b>TYPE OF COVER</b> <b>NO. OF DEPENDENTS TO ACCOMPANY</b> <b>TWO</b> <b>NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY ATTACHED</b>		
<input type="checkbox"/> RETURN FROM OVERSEAS		
<b>ETA</b> <b>STATION</b> <b>NO. OF DEP./D</b>		
8. OVERSEAS PLANNING EVALUATION (One Block must be checked)		9. REQUESTING OFFICER
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>SIGNATURE</b> <b>ROOM NO. &amp; BUILDING</b> <b>3D 5300 Hqs</b>
		<b>EXT.</b> <b>7431</b>
<b>10. COMMENTS</b> <input type="text"/> wife <input type="text"/> dau		
<b>Please schedule appointments week of 31 May 1971.</b>		
<b>11. REPORT OF EVALUATION</b> <b>Q</b> <b>U</b> <b>M</b> <b>A</b> <b>D</b> <b>E</b> <b>T</b> <b>U</b> <b>L</b> <b>C</b> <b>P</b> <b>C</b>		<b>10-078</b>
<b>DATE</b> <input type="text"/>		<b>SIGNATURE FOR CHIEF OF MEDICAL STAFF</b> <input type="text"/>

SECRET

1381

## SECRET

1. PREVIOUS POSITION PROFOUNDS, 200010Y			2. PRESENT POSITION S-25440
4. OFFICE, DIVISION, BRANCH FOR OVERSEAS STATION AND DUTY/ROUTINE		3. PRESENT POSITION S-25440	5. TELEPHONE EXTENSION 7431
7. PROPOSED STATION [Redacted]		8. PROPOSED POSITION (Title, Number, Grade) Oms Officer/0030/CS-12	
9. TYPE OF COVER AT NEW STATION [Redacted]		10. ESTIMATED DATE OF September	11. NO. OF EMPLOYEES TO COMPANY
12. COMMENTS Vice: Please schedule appointments week of 31 May 1971/  Mr. Flores' Spanish capabilities are native reading and high speaking which more than meets the language requirements of intermediate reading and speaking for the station.			
13. DATE OF REQUEST 11 Mar 71	14. SIGNATURE OF REQUESTING OFFICIAL [Redacted]	15. ROOM NUMBER AND BUILDING# & EXTENSION 3D 9309 Bldg 7431	
17. OFFICE OF SECURITY DISPOSITION  11 June 1971 [Redacted] OMS/pro			
18. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION  [Redacted]			
REQUEST FOR PCS OVERSEAS EVALUATION			

FEB 2594 100-0000000

SECRET



101

## SECRET

1. NAME (Last, First, Middle) <b>Flores, Daniel</b>	2. DATE OF BIRTH [Redacted]	3. GRADE <b>GS-08</b>
4. OFFICE DIVISION, BRANCH (or overseas station and existing cover if lateral assignment) <b>DDP/WII/4</b>	5. PRESENT POSITION <b>Ops Officer</b>	6. EMPLOYEE EXTENSION <b>6815</b>
7. PROPOSED STATION [Redacted]	8. PROPOSED POSITION (Title, Number, Grade) <b>Ops Off 0376 GS-09</b>	
9. TYPE OF COVER AT NEW STATION [Redacted]	10. ESTIMATED DATE OF DEPARTURE <b>o/a 27 April 69</b>	11. NO. OF dependents TO ACCOMPANY <b>1</b>
12. COMMENTS VICE [Redacted] [Redacted]		
13. DATE OF REQUEST <b>6 March 1969</b>	14. [Redacted]	15. ROOM NUMBER AND BUILDING <b>3D5309 Hqs.</b>
16. OFFICE OF MEDICAL SERVICES DISPOSITION		17. EXTENSION <b>6815</b>
18. OFFICE OF SECURITY DISPOSITION		
19. OVERSEAS CANDIDATE BEVVED PAYROLL DISPOSITION <b>23 MAR 769</b> QUALIFIED: [Redacted] CRAFTSMAN: CLASS: D		
REQUEST FOR PCS OVERSEAS EVALUATION		

2590 100-000000

SECRET

[Redacted]

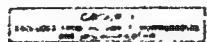
101

**SECRET**

REQUEST FOR MEDICAL EVALUATION		DATE OF REQUEST 6 March 1969
2. NAME (Last, First, Middle) <b>Flores, Daniel (dependent)</b>		3. POSITION TITLE <b>Ops Officer</b>
4. GRADE <b>GS-08</b>		5. EMPLOYEE'S EXT. <b>6815</b>
6. OFFICE, DIVISION, BRANCH <b>DDP/WII/4</b>		7. PURPOSE OF EVALUATION
<input type="checkbox"/> PRE-EMPLOYMENT <input type="checkbox"/> ENTRANCE ON DUTY <input type="checkbox"/> TOE STANDBY <input type="checkbox"/> SPECIAL TRAINING <input type="checkbox"/> ANNUAL <input type="checkbox"/> RETURN TO DUTY <input type="checkbox"/> FITNESS FOR DUTY <input type="checkbox"/> MEDICAL RETIREMENT		<input type="checkbox"/> HOUS/TOE <input checked="" type="checkbox"/> OVERSEAS ASSIGNMENT
		<b>PTD.</b> <u>o/a 27 April 1969</u> <b>STATION</b> <input type="text"/> <b>TOE ON PCS</b> <b>PCS</b> <b>TYPE OF COVER</b> <input type="text"/> <b>NO. OF DEPENDENTS TO ACCOMPANY</b> <b>1</b> <b>NO. OF DEFENDANTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</b> <b>3</b>
		<input type="checkbox"/> RETURN FROM OVERSEAS
		<b>CTA</b> <input type="text"/> <b>STATION</b> <input type="text"/> <b>NO. OF DEP.'S</b> <input type="text"/>
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<b>9. REQUESTING OFFICER</b> SIGNATURE <input type="text"/> <b>WII/Personnel</b> <b>ROOM NO. &amp; BUILDING</b> <b>3D5309 Hqs.</b> <b>EXT.</b> <b>6815</b>
10. COMMENTS Wife - <input type="text"/> = <input type="text"/>		
<b>11. REPORTS SUBJACENT &amp; QUALIFIED FOR PROPOSED OS PCS</b>		
DATE <input type="text"/>		SIGNATURE FOR CHIEF OF MEDICAL STAFF <input type="text"/>

## SECRET

1. NAME (Last, First, Middle) <b>Flores, Daniel</b>	2. DATE OF BIRTH [Redacted]	3. GRADE <b>GS-00</b>	
4. OFFICE, DIVISION, BRANCH (or overseas station and covering cover if lateral assignment) <b>DDP/WU/4</b>	5. PRESENT POSITION <b>Ops Officer</b>	6. EMPLOYEE EXTENSION <b>6818</b>	
7. PROPOSED STATION [Redacted]	8. PROPOSED POSITION (Title, Number, Grade) <b>Ops Off 0378 GS-00</b>		
9. TYPE OF COVER AT NEW STATION [Redacted]	10. ESTIMATED DATE OF DEPARTURE <b>o/a 27 April 69</b>	11. NO. OF DEPENDENTS TO ACCOMPANY <b>1</b>	
12. COMMENTS <b>VICE</b> [Redacted] [Redacted]			
13. DATE OF REQUEST <b>6 March 1969</b>	14. SIGNATURE OF REQUESTING OFFICIAL [Redacted]	15. ROOM NUMBER AND BUILDING <b>3D0309 Hqs.</b>	16. EXTENSION <b>6818</b>
17. OFFICE OF MEDICAL SERVICES DISPOSITION [Large empty box]			
18. OFFICE OF SECURITY DISPOSITION [Large empty box]			
19. OVERSEAS CANDIDATE REVIEW PANEL DISPOSITION <b>MEDICALLY-QUALIFIED-FOR PROPOSED OS PCS.</b> [Redacted] [Signature] 13 21 69			
REQUEST FOR PCS OVERSEAS EVALUATION <b>[Signature]</b>			



**SECRET**  
(When Filled In):

<b>REQUEST FOR MEDICAL EVALUATION</b>		1. DATE OF REQUEST <i>6 October 1961</i>																												
2. NAME (Last, First, Middle) <b>FIDUS, DANIEL</b>	3. POSITION TITLE <b>File Clerk</b>	4. GRADE <b>O-4</b>																												
5. OFFICE, DIVISION, BRANCH <b>DDP/OPRER</b>	6. EMPLOYEE'S SSN.																													
7. PURPOSE OF EVALUATION																														
<table border="1"><tr><td><input type="checkbox"/> PRE-EMPLOYMENT</td><td><input type="checkbox"/> HQS/TDY OVERSEAS ASSIGNMENT</td></tr><tr><td><input type="checkbox"/> ENTRANCE ON DUTY</td><td><input type="checkbox"/> TDY</td></tr><tr><td colspan="2"><b>X</b></td></tr><tr><td><input type="checkbox"/> TOY STANDBY</td><td><input type="checkbox"/> STATION</td></tr><tr><td><input type="checkbox"/> SPECIAL TRAINING</td><td><input type="checkbox"/> TDY OR PCS</td></tr><tr><td><input type="checkbox"/> ANNUAL</td><td><input type="checkbox"/> TYPE OF COVER</td></tr><tr><td><input type="checkbox"/> RETURN TO DUTY</td><td><input type="checkbox"/> NO. OF DEPENDENTS TO ACCOMPANY</td></tr><tr><td><input type="checkbox"/> FITNESS FOR DUTY</td><td><input type="checkbox"/> NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED</td></tr><tr><td><input type="checkbox"/> MEDICAL RETIREMENT</td><td colspan="2"><input type="checkbox"/> RETURN FROM OVERSEAS</td></tr><tr><td colspan="3"><input type="checkbox"/> EIA</td></tr><tr><td colspan="3"><input type="checkbox"/> STATION</td></tr><tr><td colspan="3"><input type="checkbox"/> NO. OF DEPS</td></tr></table>			<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/TDY OVERSEAS ASSIGNMENT	<input type="checkbox"/> ENTRANCE ON DUTY	<input type="checkbox"/> TDY	<b>X</b>		<input type="checkbox"/> TOY STANDBY	<input type="checkbox"/> STATION	<input type="checkbox"/> SPECIAL TRAINING	<input type="checkbox"/> TDY OR PCS	<input type="checkbox"/> ANNUAL	<input type="checkbox"/> TYPE OF COVER	<input type="checkbox"/> RETURN TO DUTY	<input type="checkbox"/> NO. OF DEPENDENTS TO ACCOMPANY	<input type="checkbox"/> FITNESS FOR DUTY	<input type="checkbox"/> NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED	<input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> RETURN FROM OVERSEAS		<input type="checkbox"/> EIA			<input type="checkbox"/> STATION			<input type="checkbox"/> NO. OF DEPS		
<input type="checkbox"/> PRE-EMPLOYMENT	<input type="checkbox"/> HQS/TDY OVERSEAS ASSIGNMENT																													
<input type="checkbox"/> ENTRANCE ON DUTY	<input type="checkbox"/> TDY																													
<b>X</b>																														
<input type="checkbox"/> TOY STANDBY	<input type="checkbox"/> STATION																													
<input type="checkbox"/> SPECIAL TRAINING	<input type="checkbox"/> TDY OR PCS																													
<input type="checkbox"/> ANNUAL	<input type="checkbox"/> TYPE OF COVER																													
<input type="checkbox"/> RETURN TO DUTY	<input type="checkbox"/> NO. OF DEPENDENTS TO ACCOMPANY																													
<input type="checkbox"/> FITNESS FOR DUTY	<input type="checkbox"/> NO. OF DEPENDENTS' REPORTS OF MEDICAL HISTORY (SF 89) ATTACHED																													
<input type="checkbox"/> MEDICAL RETIREMENT	<input type="checkbox"/> RETURN FROM OVERSEAS																													
<input type="checkbox"/> EIA																														
<input type="checkbox"/> STATION																														
<input type="checkbox"/> NO. OF DEPS																														
8. OVERSEAS PLANNING EVALUATION (One block must be checked)		9. REQUESTING OFFICER																												
<input type="checkbox"/> YES		SIGNATURE <i>Shirley Wells</i>																												
<input type="checkbox"/> NO		ROOM NO. & BUILDING <i>POB 1016 16th Street</i>																												
		EXT. <i>2781</i>																												
10. COMMENTS																														
11. SIGNATURE																														
12. REPORT OF EVALUATION <i>MUR 34 27 101</i>																														
DATE <i>12 JUN 1961</i>	SIGNATURE FOR CHIEF OF MEDICAL STAFF <i>COL. OLECE OF 62 58 60</i>	13. APPROVAL																												

**CONFIDENTIAL**

(When Filled In)

<b>REQUEST FOR PRE-EMPLOYMENT MEDICAL EVALUATION</b>			1. DATE
2. NAME (Last) PIOPES,		(First) DANIEL	(Middle)
4. ORGANIZATIONAL ASSIGNMENT 3DP/OPSER		5. POSITION, TITLE AND GRADE File Clerk OS-C4	
6. MEDICAL STAFF REQUESTED TO CHECK DESIRED ACTION BELOW, RETURN ORIGINAL COPY TO OFFICE OF PERSONNEL.			
<input type="checkbox"/> Advance Processing For S. O. S.	<input type="checkbox"/> Hold Pending Receipt of Addi- tional Medical Information (Form Letters Attached)	<input checked="" type="checkbox"/> Request Pre-Employment Medical Examination	<input type="checkbox"/> Selected For Medical Reasons
7. REMARKS  259 Forwarded as of 6 October 1961			
Signature for Medical Staff			

FORM NO. 570  
1 MAY 55

Obsolete Previous  
Editions

**CONFIDENTIAL**

(4)

## SECRET

(Other Filled In)

## QUALIFICATIONS UPDATE

Cler

## READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING, TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 58-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

## SECTION I

## BIOGRAPHIC AND POSITION DATA

EMP. SER. NO. 036130	NAME (Last-First-Middle) Flores, Daniel	DATE OF BIRTH
-------------------------	--	---------------

## SECTION II

## EDUCATION

## HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State, Country)	YEARS ATTENDED (From-To)	GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------------------	--------------------------------	--------------------------	--

## COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM--TO--	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/QUA. MRS.(Specify)
	MAJOR	MINOR				
1. American University, Washington, DC.	Political Science		1962-1967	B.A.	1967	120 hrs
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

## TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS

## OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1.				
2.				

## SECTION III

## MARITAL STATUS

1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY:			
2. NAME OF SPOUSE (Last) <span style="margin-left: 20px;">(First) <span style="margin-left: 20px;">(Middle) <span style="margin-left: 20px;">(Suffix)</span></span></span>			

3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)		
------------------	--	--	--

5. OCCUPATION	6. PRESENT EMPLOYER		
---------------	---------------------	--	--

7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED
----------------	---------------------------------------	--	-----------------------------------

## SECTION IV

## DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT RESIDENCE
1. <input type="checkbox"/> ADOL				
2. <input type="checkbox"/> DELITA				
3. <input type="checkbox"/> ADOL				
4. <input type="checkbox"/> DELITA				

**SECRET**  
en Filled [2]

三



**SECRET**

When Filled In:

A-1-A

*SLC*  
OFFICIAL USE ONLY

**QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT**

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR FENT. AVOID USING LIGHT COLORED INKS.

BIOGRAPHIC AND POSITION DATA				
1 EMP SER NO	2 NAME (Last First Middle)	3 SEX	4 DATE OF BIRTH	5 SCHEDULE GRADE STEP
086130	FLORES, DANIEL			GS - 03 - 04
6 SD	7 POSITION TITLE	8 OFFICE OF ASSIGNMENT	9 LOCATION (County City)	
D	INTELLIGENCE CLERK	WH	WASH., D.C.	
AGENCY OVERSEAS SERVICE				
AREA	PERIOD	FROM	TO	
NO OVERSEAS SERVICE				
EDUCATION				
10 DEGREE	11 MAJOR FIELD	12 COLLEGE	13 YEAR	
NO COLLEGE DEGREE ON RECORD				

**SECRET**

REF ID: A65124

07 MAY 1970

**SECRET**

When filled in

SECTION III		EDUCATION (Cont'd)			
HIGH SCHOOL					
LAST HIGH SCHOOL ATTENDED	ADDRESS	FROM	TO	YEARS ATTENDED	GRADE
					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
COLLEGE OR UNIVERSITY STUDY					
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SCHOOL		YEARS ATTENDED FROM	DEGREE GRANTED	YEAR RECEIVED
	MAJOR	MINOR			
1. The American University Washington, D.C.	Pol.Sci.	Spanish Literature	1962 - 1967	A degree will be conferred in July 1967.	1967 Sem. II Reg.
2.					
3.					
4.					
5. IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT					
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS					
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS	
1.					
2.					
3.					
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE					
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS	
1.					
2.					
3.					
4.					
5.					
AGENCY SPONSORED EDUCATION					
Specify which of any of the education shown in Section III was Agency sponsored					
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS	
1.					
2.					
3.					
4.					
5.					

**SECRET**

**SECRET**

• W H E E L B R E A K

SECTION IV

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**GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL**

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**SECTION V**

#### **LYING AND HISTORIOGRAPHIC SKILLS**

1. Typing (WPM)      2. Shorthand (WPM)      3. Indicate shorthand system used      Check (✓) any appropriate item

4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (computer, microfilm, card punch, etc.)

SECTION VI

---

**SPECIAL QUALIFICATIONS**

I. LIST ALL Hobbies AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.

2 EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 6 SECTION V. LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (indicate CW send/receiving & receiving), OFFSET PRESS, TURRET LATHE, ETC AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES

1. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED CP CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PROL, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHIATRIST, PHYSICIAN, ETC?  YES  NO

4 IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE  
MUNICIPALITY, ETC. (Provide license/certifying number if known)

*/ LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR do NOT submit copies unless requested. INDICATE THE TITLE, PUBLICATION DATE AND TYPE OF WRITING*

**B. INDICATE ANY SERVICES WHICH YOU HAVE RECEIVED AND STATE WHETHER SAME WAS FREE OR CHARGED.**

• PUBLIC SPACES AND PUBLIC USE OF PUBLIC SPACES

**SECRET**

**SECRET**

Editorial Staff 101

**SECRET**

- 7 -

SECRET

(When Filled In)

1. NAME (Last-First-Middle)	LANGUAGE DATA RECORD		
<i>Frodes</i>		PART I-GENERAL	
1. NAME (Last-First-Middle) (7-74)		2. DATE OF BIRTH (74-10) MONTH DAY YEAR	
<i>FRODES, Roniel</i>			
3. LANGUAGE (31-33)	4. TODAY'S DATE (74-10) MONTH DAY YEAR	5.	
<i>Spanish 720</i>	<i>MARCH 12 1962</i>	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY. <input checked="" type="radio"/> 2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY. 3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (NEWSPAPERS, REFERENCE MATERIALS, ETC.), USING THE DICTIONARY FREQUENTLY. 4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS; NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY. 5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.  2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.  <input checked="" type="radio"/> 3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.  4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.  5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
<input checked="" type="radio"/> 1. MY PRONUNCIATION IS NATIVE.  2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.  3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.  4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.  5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

**CONTINUATION OF PART II-LANGUAGE ELEMENTS**

**SECTION D.**

**Speaking (43)**

1. I SPEAK FREQUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FREQUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I USE SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

**SECTION E.**

**Understanding (44)**

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND FUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.

5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

**PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (85)**

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

**PART IV-CERTIFICATION**

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-1115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

March 12, 1962

SIGNATURE

*Daniel D. Brown*

1448

1471

DO NOT USE THIS SPACE		PERSONAL HISTORY STATEMENT		Sep 1961
		INSTRUCTIONS		Fill in all spaces
<p>1. Answer all questions completely or check appropriate box. If question is not applicable, write "N/A". Write "Unknown" only if you do not know the answer and it cannot be obtained from personal records. Use blank space at end of form for extra details on any question for which you have insufficient space.</p> <p>2. Type, print or write carefully; illegible or incomplete forms will not receive consideration.</p> <p>3. Consider your answers carefully. Your signature at the end of this form will certify to their correctness. Careful completion of all applicable questions will permit review of your qualifications to the best advantage.</p>				
<b>SECTION I GENERAL PERSONAL AND PHYSICAL DATA</b>				
1. FULL NAME (Last-First-Middle)		2. AGE	3. SEX	
<b>FLORES, Daniel</b>		26	MALE	FEMALE
4. HEIGHT	5. WEIGHT	6. COLOR OF EYES	7. COLOR OF HAIR	8. TYPE COMPLEXION
5' 8"	165 lbs.	Brown	Black	Dark
9. TATTOOS (Name and Location)				
Right cheek, one-half inch scar; left upper lip, one-quarter inch scar; both received during football				
10. OTHER DISTINGUISHING PHYSICAL FEATURES				
None				
12. CURRENT ADDRESS (No., Street, City, Zone, State and Country)		13. PERMANENT ADDRESS (No. Street, City, Zone, State and Country) AND PHONE NO.		
Washington, D. C.		- Washington, D. C.		
14. CURRENT PHONE NO.	15. OFFICE PHONE NO. & EXT.	16. LEGAL RESIDENCE STATE, TERRITORY OR COUNTRY		
265-8322	None	Washington, District of Columbia		
17. NICKNAMES				
Dan				
18. INDICATE CIRCUMSTANCES (including Length of Time) IN WHICH YOU HAVE EVER USED THESE NAMES				
Personal acquaintances - twelve years				
19. IF LEGAL CHANGE, GIVE PARTICULARS (where and by what authority)				
NA				
<b>SECTION II POSITION DATA</b> 1. INDICATE THE TYPE OF WORK OR POSITION FOR WHICH YOU ARE APPLYING Any phase of communications; administration; or personnel work.				
2. INDICATE THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT (You will not be considered for any position with a lower entrance salary).		3. DATE AVAILABLE FOR EMPLOYMENT		
\$ 14,250.00		Immediately		
4. INDICATE YOUR WILLINGNESS TO TRAVEL				
OCCASIONALLY	FREQUENTLY	CONSTANTLY	OTHER	
5. INDICATE YOUR WILLINGNESS TO ACCEPT ASSIGNMENT IN THE FOLLOWING LOCATIONS (Check (X) box if item applicable)				
<input checked="" type="checkbox"/> WASHINGTON, D.C.	<input type="checkbox"/> ANYWHERE IN U.S.	CERTAIN LOCATIONS ONLY (Specify)		
6. OUTSIDE CONTINENTAL U.S.				
7. INDICATE WHAT RESERVATIONS YOU WOULD PLACE ON ASSIGNMENTS OUTSIDE THE WASHINGTON, D.C. AREA				
I would be willing to travel within the United States provided said travel would not involve a permanent move whereby my legal residence would be changed. However, it is my wish to live overseas on a permanent basis.				

FORM 444 USE PREVIOUS EDITION.  
1960

JOY COONEY





## SECTION IV CONTINUED FROM PAGE 2

6. IF A GRADUATE DEGREE HAS BEEN NOTED, WITH WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

NA

## 6. TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
NA				

7. MILITARY TRAINING (FULL TIME DUTY IN SPECIALIZED SCHOOLS SUCH AS DODOMANCE, INTELLIGENCE, COMMUNICATIONS, ETC.)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	MONTHS
Marine Security Guard School - Harlerson Hall Hq. Marine Corps, Washington 25, D.C.	Security Guard Training	9/22/58	10/31/58	(5 Wks)

## 8. OTHER EDUCATIONAL TRAINING NOT INDICATED ABOVE

Weapons Training in Marine Corps.  
Acted as partisan during cold weather training at Bridgeport, California (Pickle Meadows - CSM).

## SECTION V FOREIGN LANGUAGE ABILITIES

1. LANGUAGE <small>(List below each language in which you possess one degree of competence. Indicate your proficiency in Read, Write or Speak by placing a check (X) in the appropriate boxes)</small>	COMPETENCE IN ORDER LISTED R=Read W=Write S=Speak						HOW ACQUIRED			
	ESSENTIAL	FAMILIAR	ACQUAINTED	ACQUAINTED	LIMITED	KNOWLEDGE	NATIVE	PROF.	CONTACT	ACADEMIC
	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE	KNOWLEDGE
Spanish	X	X	X	X	X	X	X	X	X	X

## 9. IF YOU HAVE CHECKED "ACADEMIC STUDY" UNDER "HOW ACQUIRED" INDICATE LENGTH AND INTENSIVENESS OF STUDY

NA

10. IF YOU HAVE INDICATED FLUENCY FOR A LANGUAGE FOR WHICH SIGNIFICANT DIFFERENCES IN SPEECH AND WRITING EXIST, PLEASE STATE COMPETENCE THEREIN

NA

11. DUE TO YOUR LANGUAGE PROFICIENCY, DO YOU ACT AS INTERPRETER IN TECHNICAL ENGINEERING FIELD? IF YES, PLEASE STATE THE LANGUAGE(S) IN WHICH YOU CAN ACT AS INTERPRETER

Could act as literal interpreter at almost any level.

12. IF YOU HAVE INDICATED FLUENCY FOR A LANGUAGE FOR WHICH SIGNIFICANT DIFFERENCES IN SPEECH AND WRITING EXIST, PLEASE STATE COMPETENCE THEREIN

X NA

SECTION VI - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
1. LIST BELOW ANY FOREIGN REGIONS OR COUNTRIES IN WHICH YOU HAVE TRAVELED OR ACQUIRED KNOWLEDGE AS A RESULT OF RESIDENCE, STUDY, OR BUSINESS. INDICATE TYPE OF KNOWLEDGE SUCH AS TERRAIN, HARBOURS, UTILITIES, RAILROADS, INDUSTRIES, POLITICAL PARTIES, ETC.							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF ACQUISITION OR DATE OF TRAVEL	DATES AND PLACE OF STAY	KNOWLEDGE ACQUIRED BY RESIDENCE	TRAVEL	BORN	STUDY ABROAD
Bolivia	General knowledge	11/13/58 to 1/1/60		X			
Peru	General knowledge	1/1/60 to 11/20/60		X			
Chile		6/15/59 to 6/21/59			X		
Argentina		6/21/59 to 8/3/59			X		
Uruguay		6/30/59 to 7/2/59				X	
2. INDICATE THE PURPOSE OF VISIT, RESIDENCE, OR TRAVEL IN EACH OF THE REGIONS OR COUNTRIES LISTED ABOVE.							
Marine Security Guard - American Embassy - Bolivia and Peru Vacation - Chile; Argentina; Uruguay; Panama							
3. UNITED STATES PASSPORT NUMBER AND EXPIRATION DATE, IF ISSUED							
No. 174850 (SP-35575) Passport has been cancelled.							
SECTION VII - TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (copy)	2. SHORTHAND (copy)	3. SHORTHAND SYSTEM USED - CHECK APPROPRIATE ITEM					
45 wpm	None	GREGG	SWEDBERG	STENOTYPE	OTHER - Specify		
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (Computers, Mimeograph, Card Punch, Etc.)							
Thermofax, mimeograph, switchboard							
SECTION VIII - SPECIAL QUALIFICATIONS							
5. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH.							
Football	- good						
Basketball	- fair						
Swimming	- good						
Rafting	- average						
Contract Bridge	- very good						
6. INDICATE ANY SPECIAL QUALIFICATIONS RESULTING FROM EXPERIENCE OR THE KIND WHICH WOULD FIT YOU FOR A PARTICULAR POSITION OR TYPE OF WORK.							
None to my knowledge							
7. EXCLUDING BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN SECTION VII, NAME ANY SPECIAL EQUIPMENT YOU POSSIBLY RELIED UPON OTHER THAN PAPER AND PENCIL WHICH YOU USED IN YOUR TRADE, TRADES, TRADES OF SPEED, RECORDING AND READING, OFFICE WORK, THROAT SINGING, SCIENTIFIC AND PROFESSIONAL SERVICES.							
None							

SECTION VIII - CERTIFICATE OF INFORMATION	
<p><b>8. ARE YOU ONE OF THESE INDIVIDUALS? (Check all applicable boxes) Examples of such as Pilot, Electrician, Radio Operator, Teacher, Lawyer, CPA, Medical Technician, ETC.</b></p> <p><b>9. HAVE YOU EVER BEEN SUBJECT TO A CRIMINAL PROSECUTION OR JUDGMENT? (Check if Yes or No)</b></p> <p><b>10. HAVE YOU EVER BEEN DISMEMBERED FROM ANY PROFESSIONAL OR TRADE ASSOCIATION? (Check if Yes or No)</b></p>	
<p>NA</p>	
<b>11. FIRST LICENSE OR CERTIFICATE / Year of Issue</b>	<b>12. LATEST LICENSE OR CERTIFICATE / Year of Issue</b>
NA	NA
<p><b>13. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHORITY. (Name, Title, Name of publication, Inc., Date, Title, Publication date, and type of writing (Invention or scientific articles, Technical Inquiries, Columns, Novels, Short Stories, Etc.)</b></p> <p>None</p>	
<p><b>14. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED</b></p> <p>None</p>	
<p><b>15. LIST PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE</b></p> <p>Have spoken in my father's church and other churches approximately 150 times. Met and associated public in Embassies during my tour of duty with the Marine Security Guard.</p> <p><b>16. LIST ANY PROFESSIONAL OR ACADEMIC ORGANIZATIONS OR SOCIETIES IN WHICH YOU ARE A MEMBER OR HAVE RECEIVED A MEMBER LIST ACADEMIC HONORS YOU HAVE RECEIVED.</b></p> <p>None</p>	
<p><b>SECTION IX - EMPLOYMENT HISTORY</b></p> <p><b>NOTE: LIST LAST POSITION FIRST. Indicate chronological history of employment for last 15 years. Account for all periods including casual employment and all periods of unemployment. Give address and state what you did during periods of unemployment. List all civilian employment by a foreign government, regardless of dates. In completing items 1, 2, 3 &amp; 4, describe duties &amp; consider your experience carefully and provide meaningful, concise statements.</b></p>	
<b>1. DATES OF Employment</b>	<b>2. NAME OF EMPLOYER</b>
From 1949 to 1953	Hillburn's Drug Store
<b>3. ADDRESS (No., Street, City, State, Country)</b>	
San Marcos, Texas	
<b>4. KIND OF BUSINESS</b>	<b>5. NAME OF SUPERVISOR</b>
Drug Store	Mrs. [ ]
<b>6. TITLE OR JOB</b>	
Fountain attendant	
<b>7. DESCRIPTION OF DUTIES</b>	
Employee at soda counter	
<b>8. REASONS FOR LEAVING</b>	
To participate in school events (football).	
<p><b>SECTION X - CERTIFICATE OF PERSONALITY</b></p> <p>1. I am a U.S. citizen.</p> <p>2. I have no criminal record.</p> <p>3. I have no gambling problem.</p> <p>4. I have no drug problem.</p> <p>5. I have no alcohol problem.</p> <p>6. I have no mental health problem.</p> <p>7. I have no physical health problem.</p> <p>8. I have no financial problems.</p> <p>9. I have no legal problems.</p> <p>10. I have no social problems.</p> <p>11. I have no political problems.</p> <p>12. I have no religious problems.</p> <p>13. I have no family problems.</p> <p>14. I have no health problems.</p> <p>15. I have no financial problems.</p> <p>16. I have no legal problems.</p> <p>17. I have no social problems.</p> <p>18. I have no political problems.</p> <p>19. I have no religious problems.</p> <p>20. I have no family problems.</p> <p>21. I have no health problems.</p> <p>22. I have no financial problems.</p> <p>23. I have no legal problems.</p> <p>24. I have no social problems.</p> <p>25. I have no political problems.</p> <p>26. I have no religious problems.</p> <p>27. I have no family problems.</p> <p>28. I have no health problems.</p> <p>29. I have no financial problems.</p> <p>30. I have no legal problems.</p> <p>31. I have no social problems.</p> <p>32. I have no political problems.</p> <p>33. I have no religious problems.</p> <p>34. I have no family problems.</p> <p>35. I have no health problems.</p> <p>36. I have no financial problems.</p> <p>37. I have no legal problems.</p> <p>38. I have no social problems.</p> <p>39. I have no political problems.</p> <p>40. I have no religious problems.</p> <p>41. I have no family problems.</p> <p>42. I have no health problems.</p> <p>43. I have no financial problems.</p> <p>44. I have no legal problems.</p> <p>45. I have no social problems.</p> <p>46. I have no political problems.</p> <p>47. I have no religious problems.</p> <p>48. I have no family problems.</p> <p>49. I have no health problems.</p> <p>50. I have no financial problems.</p> <p>51. I have no legal problems.</p> <p>52. I have no social problems.</p> <p>53. I have no political problems.</p> <p>54. I have no religious problems.</p> <p>55. I have no family problems.</p> <p>56. I have no health problems.</p> <p>57. I have no financial problems.</p> <p>58. I have no legal problems.</p> <p>59. I have no social problems.</p> <p>60. I have no political problems.</p> <p>61. I have no religious problems.</p> <p>62. I have no family problems.</p> <p>63. I have no health problems.</p> <p>64. I have no financial problems.</p> <p>65. I have no legal problems.</p> <p>66. I have no social problems.</p> <p>67. I have no political problems.</p> <p>68. I have no religious problems.</p> <p>69. I have no family problems.</p> <p>70. I have no health problems.</p> <p>71. I have no financial problems.</p> <p>72. I have no legal problems.</p> <p>73. I have no social problems.</p> <p>74. I have no political problems.</p> <p>75. I have no religious problems.</p> <p>76. I have no family problems.</p> <p>77. I have no health problems.</p> <p>78. I have no financial problems.</p> <p>79. I have no legal problems.</p> <p>80. I have no social problems.</p> <p>81. I have no political problems.</p> <p>82. I have no religious problems.</p> <p>83. I have no family problems.</p> <p>84. I have no health problems.</p> <p>85. I have no financial problems.</p> <p>86. I have no legal problems.</p> <p>87. I have no social problems.</p> <p>88. I have no political problems.</p> <p>89. I have no religious problems.</p> <p>90. I have no family problems.</p> <p>91. I have no health problems.</p> <p>92. I have no financial problems.</p> <p>93. I have no legal problems.</p> <p>94. I have no social problems.</p> <p>95. I have no political problems.</p> <p>96. I have no religious problems.</p> <p>97. I have no family problems.</p> <p>98. I have no health problems.</p> <p>99. I have no financial problems.</p> <p>100. I have no legal problems.</p> <p>101. I have no social problems.</p> <p>102. I have no political problems.</p> <p>103. I have no religious problems.</p> <p>104. I have no family problems.</p> <p>105. I have no health problems.</p> <p>106. I have no financial problems.</p> <p>107. I have no legal problems.</p> <p>108. I have no social problems.</p> <p>109. I have no political problems.</p> <p>110. I have no religious problems.</p> <p>111. I have no family problems.</p> <p>112. I have no health problems.</p> <p>113. I have no financial problems.</p> <p>114. I have no legal problems.</p> <p>115. I have no social problems.</p> <p>116. I have no political problems.</p> <p>117. I have no religious problems.</p> <p>118. I have no family problems.</p> <p>119. I have no health problems.</p> <p>120. I have no financial problems.</p> <p>121. I have no legal problems.</p> <p>122. I have no social problems.</p> <p>123. I have no political problems.</p> <p>124. I have no religious problems.</p> <p>125. I have no family problems.</p> <p>126. I have no health problems.</p> <p>127. I have no financial problems.</p> <p>128. I have no legal problems.</p> <p>129. I have no social problems.</p> <p>130. I have no political problems.</p> <p>131. I have no religious problems.</p> <p>132. I have no family problems.</p> <p>133. I have no health problems.</p> <p>134. I have no financial problems.</p> <p>135. I have no legal problems.</p> <p>136. I have no social problems.</p> <p>137. I have no political problems.</p> <p>138. I have no religious problems.</p> <p>139. I have no family problems.</p> <p>140. I have no health problems.</p> <p>141. I have no financial problems.</p> <p>142. I have no legal problems.</p> <p>143. I have no social problems.</p> <p>144. I have no political problems.</p> <p>145. I have no religious problems.</p> <p>146. I have no family problems.</p> <p>147. I have no health problems.</p> <p>148. I have no financial problems.</p> <p>149. I have no legal problems.</p> <p>150. I have no social problems.</p> <p>151. I have no political problems.</p> <p>152. I have no religious problems.</p> <p>153. I have no family problems.</p> <p>154. I have no health problems.</p> <p>155. I have no financial problems.</p> <p>156. I have no legal problems.</p> <p>157. I have no social problems.</p> <p>158. I have no political problems.</p> <p>159. I have no religious problems.</p> <p>160. I have no family problems.</p> <p>161. I have no health problems.</p> <p>162. I have no financial problems.</p> <p>163. I have no legal problems.</p> <p>164. I have no social problems.</p> <p>165. I have no political problems.</p> <p>166. I have no religious problems.</p> <p>167. I have no family problems.</p> <p>168. I have no health problems.</p> <p>169. I have no financial problems.</p> <p>170. I have no legal problems.</p> <p>171. I have no social problems.</p> <p>172. I have no political problems.</p> <p>173. I have no religious problems.</p> <p>174. I have no family problems.</p> <p>175. I have no health problems.</p> <p>176. I have no financial problems.</p> <p>177. I have no legal problems.</p> <p>178. I have no social problems.</p> <p>179. I have no political problems.</p> <p>180. I have no religious problems.</p> <p>181. I have no family problems.</p> <p>182. I have no health problems.</p> <p>183. I have no financial problems.</p> <p>184. I have no legal problems.</p> <p>185. I have no social problems.</p> <p>186. I have no political problems.</p> <p>187. I have no religious problems.</p> <p>188. I have no family problems.</p> <p>189. I have no health problems.</p> <p>190. I have no financial problems.</p> <p>191. I have no legal problems.</p> <p>192. I have no social problems.</p> <p>193. I have no political problems.</p> <p>194. I have no religious problems.</p> <p>195. I have no family problems.</p> <p>196. I have no health problems.</p> <p>197. I have no financial problems.</p> <p>198. I have no legal problems.</p> <p>199. I have no social problems.</p> <p>200. I have no political problems.</p> <p>201. I have no religious problems.</p> <p>202. I have no family problems.</p> <p>203. I have no health problems.</p> <p>204. I have no financial problems.</p> <p>205. I have no legal problems.</p> <p>206. I have no social problems.</p> <p>207. I have no political problems.</p> <p>208. I have no religious problems.</p> <p>209. I have no family problems.</p> <p>210. I have no health problems.</p> <p>211. I have no financial problems.</p> <p>212. I have no legal problems.</p> <p>213. I have no social problems.</p> <p>214. I have no political problems.</p> <p>215. I have no religious problems.</p> <p>216. I have no family problems.</p> <p>217. I have no health problems.</p> <p>218. I have no financial problems.</p> <p>219. I have no legal problems.</p> <p>220. I have no social problems.</p> <p>221. I have no political problems.</p> <p>222. I have no religious problems.</p> <p>223. I have no family problems.</p> <p>224. I have no health problems.</p> <p>225. I have no financial problems.</p> <p>226. I have no legal problems.</p> <p>227. I have no social problems.</p> <p>228. I have no political problems.</p> <p>229. I have no religious problems.</p> <p>230. I have no family problems.</p> <p>231. I have no health problems.</p> <p>232. I have no financial problems.</p> <p>233. I have no legal problems.</p> <p>234. I have no social problems.</p> <p>235. I have no political problems.</p> <p>236. I have no religious problems.</p> <p>237. I have no family problems.</p> <p>238. I have no health problems.</p> <p>239. I have no financial problems.</p> <p>240. I have no legal problems.</p> <p>241. I have no social problems.</p> <p>242. I have no political problems.</p> <p>243. I have no religious problems.</p> <p>244. I have no family problems.</p> <p>245. I have no health problems.</p> <p>246. I have no financial problems.</p> <p>247. I have no legal problems.</p> <p>248. I have no social problems.</p> <p>249. I have no political problems.</p> <p>250. I have no religious problems.</p> <p>251. I have no family problems.</p> <p>252. I have no health problems.</p> <p>253. I have no financial problems.</p> <p>254. I have no legal problems.</p> <p>255. I have no social problems.</p> <p>256. I have no political problems.</p> <p>257. I have no religious problems.</p> <p>258. I have no family problems.</p> <p>259. I have no health problems.</p> <p>260. I have no financial problems.</p> <p>261. I have no legal problems.</p> <p>262. I have no social problems.</p> <p>263. I have no political problems.</p> <p>264. I have no religious problems.</p> <p>265. I have no family problems.</p> <p>266. I have no health problems.</p> <p>267. I have no financial problems.</p> <p>268. I have no legal problems.</p> <p>269. I have no social problems.</p> <p>270. I have no political problems.</p> <p>271. I have no religious problems.</p> <p>272. I have no family problems.</p> <p>273. I have no health problems.</p> <p>274. I have no financial problems.</p> <p>275. I have no legal problems.</p> <p>276. I have no social problems.</p> <p>277. I have no political problems.</p> <p>278. I have no religious problems.</p> <p>279. I have no family problems.</p> <p>280. I have no health problems.</p> <p>281. I have no financial problems.</p> <p>282. I have no legal problems.</p> <p>283. I have no social problems.</p> <p>284. I have no political problems.</p> <p>285. I have no religious problems.</p> <p>286. I have no family problems.</p> <p>287. I have no health problems.</p> <p>288. I have no financial problems.</p> <p>289. I have no legal problems.</p> <p>290. I have no social problems.</p> <p>291. I have no political problems.</p> <p>292. I have no religious problems.</p> <p>293. I have no family problems.</p> <p>294. I have no health problems.</p> <p>295. I have no financial problems.</p> <p>296. I have no legal problems.</p> <p>297. I have no social problems.</p> <p>298. I have no political problems.</p> <p>299. I have no religious problems.</p> <p>300. I have no family problems.</p>	

SECTION IV - CONTINUED FROM PAGE 3	
1. INCLUSIVE DATES (From and To - By Mo. and Yr.)	2. NAME OF EMPLOYING FIRM OR AGENCY
July 1955 - June 1956	Clement Grocery Store
3. ADDRESS (No., Street, City, State, Country)	
South Mainline St., San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Grocery Store	Mrs. [REDACTED]
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS, GRADE/II Federal Services
Butcher	\$10.00 PER WEEK
9. DESCRIPTION OF DUTIES	
Slaughtering and preparing meat for sale as well as actual selling.	
10. REASONS FOR LEAVING	
To attend college	?
11. INCLUSIVE DATES (From and To - By Mo. and Yr.)	2. NAME OF EMPLOYING FIRM OR AGENCY
May, 1955 - September, 1955	San Marcos Baptist Academy
3. ADDRESS (No., Street, City, State, Country)	
San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Private School	Mrs. [REDACTED]
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS, GRADE/II Federal Services
Painter's Assistant	\$25.00 PER WEEK
9. DESCRIPTION OF DUTIES	
Painted dormitories in the Academy	
10. REASONS FOR LEAVING	
To attend school	
11. INCLUSIVE DATES (From and To - By Mo. and Yr.)	2. NAME OF EMPLOYING FIRM OR AGENCY
September, 1955 - July, 1957	Economy Department Stores
3. ADDRESS (No., Street, City, State, Country)	
San Marcos, Texas	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Clothing Store	Mrs. [REDACTED]
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS, GRADE/II Federal Services
Sales Clerk	\$30.00 PER WEEK
9. DESCRIPTION OF DUTIES	
Assisted customers in selecting and buying goods.	
10. REASONS FOR LEAVING	
To join the Marine Corps.	
11. INCLUSIVE DATES (From and To - By Mo. and Yr.)	2. NAME OF EMPLOYING FIRM OR AGENCY
July 24, 1957 - July 25, 1961	United States Marine Corps
3. ADDRESS (No., Street, City, State, Country)	
Marine Corps Schools, Quantico, Virginia	
4. KIND OF BUSINESS	5. NAME OF SUPERVISOR
Military	[REDACTED]
6. TITLE OF JOB	7. SALARY OR EARNINGS 8. CLASS, GRADE/II Federal Services
Marine Corps Museum Attendant	\$110.00 PER MONTHLY PAY. (Sgt.)

## SECTION IX - CONTINUED FROM PAGE 4

8. DESCRIPTION OF DUTIES Acted as guide to all visitors entering Museum, explaining Marine Corps history, etc. Also on several occasions acted as interpreter for visiting military personnel from Latin America.		
9. REASONS FOR LEAVING Discharged		
10. INCLUSIVE DATES (From and To - Month and Year) July 24, 1961 - August 22, 1971		11. NAME OF EMPLOYER, FIRM OR AGENCY Ohio Valley Engineering Company
12. ADDRESS (No., Street, City, State, Country) 34, Capitol and I Streets, S. W., Washington, D. C.		13. KIND OF BUSINESS Construction
14. TITLE OF JOB Laborer		15. NAME OF SUPERVISOR Mr. [Redacted]
16. SALARY OR EARNINGS \$ 2.17 per hour		17. CLASS, GRADE OR Federal Service Service
18. DESCRIPTION OF DUTIES Handyman for Company		
19. REASONS FOR LEAVING Temporary work while seeking permanent employment.		
20. INCLUSIVE DATES (From and To - Month and Year)		21. NAME OF EMPLOYER, FIRM OR AGENCY
22. ADDRESS (No., Street, City, State, Country)		23. KIND OF BUSINESS
24. TITLE OF JOB		25. NAME OF SUPERVISOR
26. SALARY OR EARNINGS per hour		27. CLASS, GRADE OR Federal Service
28. DESCRIPTION OF DUTIES		
29. REASONS FOR LEAVING		
30. IF PRIOR SERVICE WITH THE FEDERAL GOVERNMENT IS NOTED ABOVE, INDICATE THE NUMBER OF YEARS CREDITABLE TOWARD U.S. CIVIL SERVICE RETIREMENT, IF ANY 7 1/2 years		
31. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION NO HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN NO IF YOUR ANSWER TO EITHER OR BOTH QUESTIONS IS "YES", GIVE DETAILS Honorable discharge from United States Marine Corps.		

SECTION X		MILITARY SERVICE			
		1. CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT UNDER THE UNIVERSAL MILITARY TRAINING AND SERVICE ACT OF 1948 (40 U.S.C. 107)		<input checked="" type="checkbox"/> YES		2. SELECTIVE SERVICE CLASSIFICATION	
		<input type="checkbox"/> 1A		3. SELECTIVE SERVICE NO.	
		<input type="checkbox"/> NO		4. DATE OF BIRTH	
				5. LOCAL DRAFT BOARD NO. OR DESIGNATION AND ADDRESS	
2. IF DEFERRED, GIVE REASON		NA		655 - 111-1/2 E. SAN ANTONIO ST.,	
				7. MILITARY SERVICE RECORDS	
		8. CURRENT AND OR PAST ORGANIZATIONAL MEMBERSHIP			
CHECK (X) AS APPROPRIATE		ARMY	NAVY	AIR FORCE	COAST GUARD
HAVE SERVED ON		<input checked="" type="checkbox"/>			
NOW SERVING ON		<input type="checkbox"/> None			
2. BRANCH OR CORPS OF ABOVE CHECKED ORGANIZATION(S)		Personnel Administ 1702			
3. DATE SEPARATED FROM EXTENDED ACTIVE DUTY (Most recent)		8. TOTAL LENGTH OF EXTENDED ACTIVE DUTY IN U.S. ARMED FORCES			
25 July, 1961		10 years			
9. DATE ENTERED / PAST SERVICE		CURRENT SERVICE		8. TOTAL LENGTH OF ACTIVE DUTY IN FOREIGN MILITARY ORGANIZATION	
ACTIVE DUTY		26 July, 1957			
7. RANK, GRADE OR PAST SERVICE RATE		CURRENT SERVICE		9. SERVICE SERIAL OR FILE NUMBER (If now serving, provide current rank/grade)	
Cpl. (E-4)					
9. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Job or Designation) AND TITLE		PAST SERVICE		CURRENT SERVICE	
Clerk - Chief Clerk					
10. SECONDARY MIL. OCCUPATIONAL SPECIALTY (Job or Designation) AND TITLE		PAST SERVICE		CURRENT SERVICE	
None					
11. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate whether applicable to past or current service)		Past Service: Clerk - Maintained personnel service records. 2 years as Security Guard in the American Embassies in La Paz, Bolivia and Lima, Peru.			
		12. CHECK (X) TYPE OF SEPARATION FROM ACTIVE DUTY			
<input checked="" type="checkbox"/> HONORABLE DISCHARGE		RETIREMENT FOR SERVICE		UNIQUE HARSHIPS	
<input checked="" type="checkbox"/> RELEASE TO INACTIVE DUTY		RETIREMENT FOR CONST. DISABILITY		OTHER	
<input type="checkbox"/> RETIREMENT FOR AGE		RETIREMENT FOR PHYSICAL DISABILITY			
		13. CHECK (X) COMPONENT IN WHICH YOU SERVED			
<input checked="" type="checkbox"/> REGULAR		<input checked="" type="checkbox"/> RESERVE (INCLUDING THE NATIONAL AND AIR NATIONAL GUARD)		OTHER (INCLUDE SUBS)	
		14. MILITARY RESERVE, NATIONAL GUARD AND ROTC STATUS			
1. DO YOU NOW HAVE RESERVE STATUS?		<input checked="" type="checkbox"/> YES		2. ARE YOU NOW A MEMBER OF THE NATIONAL GUARD OR AIR NATIONAL GUARD?	
		<input type="checkbox"/> NO		3. ARE YOU NOW A MEMBER OF THE ROTC?	
				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEMS 1, 2 OR 3 ABOVE, CHECK COMPONENT MEMBERSHIP BELOW					
ARMY <input checked="" type="checkbox"/> MARINE CORPS <input type="checkbox"/> NAV GUARD <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NAVY ROTC <input type="checkbox"/> INT'L. CTR. ROTC CATEGORY NUMBER					
NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD <input type="checkbox"/> ARMY ROTC <input type="checkbox"/> AIR FORCE ROTC					
5. CURRENT RANK, GRADE OR RATE Cpl. (E-4)		6. DATE OF APPOINTMENT		7. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION	
		26 July, 1957		January 1, 1962	
8. CHECK (X) CURRENT RESERVE CATEGORY		READY RESERVE		STANDBY ACTIVE, STANDBY INACTIVE, RETIRED	
<input checked="" type="checkbox"/> 0111				None	
9. PRIMARY MILITARY OCCUPATIONAL SPECIALTY (Job or Designation) AND TITLE		10. SECONDARY MILITARY OCCUPATIONAL SPECIALTY (Job or Designation) AND TITLE			
11. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES		None			
12. ARE YOU CURRENTLY ASSIGNED TO AN ATTACHED TO A RESERVE, NATIONAL GUARD OR ROTC TRAINING UNIT?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		13. IF YOU HAVE ANSWERED "YES" TO ITEM 12, GIVE UNIT OR AGENCY AND ADDRESS	
14. HAVE YOU A MILITARY MOBILIZATION ASSIGNMENT?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		15. IF YOU HAVE ANSWERED "YES" TO ITEM 14, GIVE UNIT OR AGENCY AND ADDRESS	
16. INDICATE TOTAL MILITARY SERVICE YEARS / MONTHS		17. WHERE ARE YOUR SERVICE RECORDS KEPT FOR LONGEVITY PURPOSES (INCLUDE ACTIVE AND INACTIVE DUTY)			
7 / 7		18. INSTRUCTIONS: Fill in handwritten			

SECTION XI		FINANCIAL STATUS	
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?		X NO	
2. IF YOUR ANSWER IS "NO" TO THE ABOVE, GIVE THE ABOVE STATE SOURCES OF OTHER INCOME			
<b>Wife's Income</b>			
3. BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS			
NAME & ADDRESS		ADDRESS (City, State, Country)	
The Bank of California, N.A.		330 S.W. 5th Avenue, Portland, Oregon	
Union Trust Company		15 and H Streets, N.W., Washington, D.C.	
4. HAVE YOU EVER BEEN IN OR RECENTLY FOR BANKRUPTCY		YES X NO	
5. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE PARTICULARS INCLUDING COURT AND DATE(S)			
6. GIVE THREE CREDIT REFERENCES IN THE UNITED STATES			
NAME		ADDRESS (Name, Street, City, State)	
General Motors Acceptance Corp.		1510 S.W. Yamhill Street, Portland 5, Oregon	
Gulf Oil Corporation		P.O. Box 72-5, Atlanta 9, Georgia	
Minde Furniture Company		917 Carolina Street, Fredericksburg, Virginia	
7. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT, PENSION OR COMPENSATION FOR MILITARY OR NAVAL SERVICE		YES X NO	
8. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE COMPLETE DETAILS			
9. DO YOU HAVE ANY FINANCIAL INTEREST IN OR CAPITAL CONNECTIONS WITH U.S. CORPORATIONS OR BUSINESSES, OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS?			
<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO (If answer is YES, furnish details on separate sheet.)	
SECTION XII		MARITAL STATUS	
1. PRESENT STATUS (Married, Married Separated, Divorced or Annulled) SPECIFY		Married	
2. STATE DATE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS			
NA			
WIFE, HUSBAND: If you have been married twice or more than once, including annulments - use a separate sheet for former wife or husband giving date of all previous marriages. If marriage contemplated, fill in appropriate information for fiance.			
3. NAME (First) (Middle) (Surname)		Address	
		2109 9th	
4. STATE ANY OTHER NAMES EVER USED		INDICATE CIRCUMSTANCES (including length of time) UNDER WHICH ONE OR THESE NAMES WERE USED. IF LISTS EXCEED SIZE, GIVE PARTICULARS ON SEPARATE SHEET. USE EXTRA SPACE PROVIDED ON PAGE 10 OF THIS FORM TO RECORD THIS INFORMATION.	
5. DATE OF MARRIAGE		PLACE OF MARRIAGE (City, State, Country)	
November 14, 1960 Lima, Peru			
6. MEDIUM HOME ADDRESS BEFORE MARRIAGE (to Street, City, State, Country)			
American Embassy, La Paz, Bolivia			
6. LIVING		6. DATE OF DEATH	
X Yes		X Cause of Death	
7. CURRENT ADDRESS (City, State, Country)			
		Washington, D.C.	
8. DATE OF BIRTH		9. PLACE OF BIRTH (City, State, Country)	
		Portland, Oregon	
10. CITIZENSHIP		11. IN THE UNITED STATES	
		United States of America	

SECTION XII CONTINUED PREVIOUS PAGE				
18. IF BORN OUTSIDE U.S. - DATE OF ENTRY	19. PLACE OF ENTRY			
NA	NA			
18. FORMER CITIZENSHIP	19. DATE U.S. CITIZENSHIP ACQUIRED (City, State, Country)			
NA	ACQUIRED NA			
19. OCCUPATION	20. POSITION EMPLOYED AS A GOVERNMENT EMPLOYEE OR IF SPONSOR, DEPARTMENT OR BOYKIN AND FRANCIS Formerly, Department of State			
Legal Secretary				
21. EMPLOYER'S OR BUSINESS ADDRESS (No., Street, City, State, Country)	22. DATES OF MILITARY SERVICE (Branch and No. and Dates)			
1000 15th St. N.W. Suite 623 Washington, D.C.	None			
23. BRANCH OF SERVICE	24. COUNTRY WITH WHICH MILITARY SERVICE AFFILIATED			
25. DETAILS OF OTHER GOVERNMENT SERVICE IN FOREIGN COUNTRIES - Jan. 1/53 - Oct. 1960; CIVIL SERVICE - (MILITARY)				
SECTION XIII CHILDREN AND OTHER DEPENDENTS				
1. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	ADDRESS
None				
2. NUMBER OF CHILDREN (INCLUDING stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 yrs. OF AGE, AND NOT SELF-SUPPORTING.		3. NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepchildren, and adopted children) WHO YOU FOR AT LEAST ONE OF THE FOLLOWING, OR CHILDREN 21 yrs. OF AGE WHO ARE NOT SELF-SUPPORTING.		
SECTION XIV FATHER'S CIVIL SERVICE INFORMATION (or Stepfather and in Case of Death, Mother)				
4. FULL NAME (Last-First-Middle)	5. LIVING	6. DATE OF DEATH	7. CAUSE OF DEATH	
	Y YES	NO		
8. STATE OTHER NAMES HE HAS USED	INDICATE CIRCUMSTANCES (DURATION, LENGTH OF TIME) UNDER WHICH HE HAS EVER USED THESE NAMES. IF NAME CHANGED, GIVE PARTICULARS, LENGTH AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 10 OF THIS FORM TO RECORD THIS INFORMATION.			
None				
9. CURRENT ADDRESS - Give last address, if deceased No., Street, City, State, Country				
SAC MEXICO, D.F.				
10. DATE OF BIRTH	11. PLACE OF BIRTH (City, State, Country)	12. CITIZENSHIP		
	MAY 7, 1893, Mexico, D.F., Mexico	MEXICAN		
13. IF BORN OUTSIDE U.S. - DATE OF ENTRY	14. PLACE OF ENTRY			
MAY 7, 1893	NA			
15. FORMER CITIZENSHIP	16. DATE U.S. CITIZENSHIP ACQUIRED	17. WHERE ACQUIRED (City, State, Country)		
MEXICAN	1917	1000 15th St. N.W. Suite 623 Washington, D.C.		
18. OCCUPATION	19. POSITION EMPLOYED AS A GOVERNMENT EMPLOYEE OR SPONSOR (If Period of Employment or Unemployed)			
Baptist Minister	Mexican Baptist Church			
20. EDUCATIONAL ATTENDANCE ACCORDING TO DATE OF LAST CLASS ATTENDED OR DATE OF LAST EQUIVALENT	21. COUNTRY			
	TO my knowledge never			
22. DETAILS OF OTHER GOVERNMENT SERVICE IN FOREIGN COUNTRIES - (If Possible)				

SECTION XV MOTHER Give same information for Stepmother in separate sheet			
1. FULL NAME (Last-First-Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Unknown		
INDICATE CIRCUMSTANCES INCLUDING NAME OF PERSON UNDER WHOM SHE HAS EVER USED THESE NAMES IF LOCAL CHANGE, GIVE PARTICULARS THEREOF AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.			
NOTE TO TTY KNOWLEDGE			
5. CURRENT ADDRESS - GIVE LAST ADDRESS, IF DECEASED "NA". Street, City, State, Country			
San Marcos, Texas			
6. DATE OF BIRTH	7. PLACE OF BIRTH (City, State, Country)	8. CITIZENSHIP	
	Mier y Noriega, Nuevo Leon, Mexico	Mexican	
10. IF BORN OUTSIDE U.S.- DATE OF ENTRY	11. PLACE OF ENTRY		
Unknown	Unknown		
12. PAST CITIZENSHIP (Country)	13. DATE U.S. CITIZENSHIP ACQUIRED	14. WHERE ACQUIRED (City, State, Country)	
NA	NA	NA	NA
15. OCCUPATION	16. PRESENT EMPLOYER (Give last employer, if deceased or unemployed)		
Housewife	NA		
17. EMPLOYER'S BUSINESS ADDRESS OR MOTHER'S BUSINESS ADDRESS IF SELF EMPLOYED			
NA			
18. DATES OF MILITARY SERVICE (From-and-To)	19. BRANCH OF SERVICE	20. COUNTRY	
NA	NA	NA	
21. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN			
NA			
SECTION XVI BROTHERS AND SISTERS (Including Half-, Step- and Adopted Brothers and Sisters)			
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	11
7. FULL NAME (Last-First-Middle)	8. RELATIONSHIP	9. CITIZENSHIP (Country)	
	Sister	U.S. of America	
8. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		9. LIVING	10. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	39
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Marcos, Texas		X YES <input type="checkbox"/> NO	21
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	13
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	23
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Sister	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	24
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	26
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. CITIZENSHIP (Country)	
	Brother	U.S. of America	
4. CURRENT ADDRESS (No., Street, City, Zone, State, Country)		5. LIVING	6. AGE
San Antonio, Texas		X YES <input type="checkbox"/> NO	28

SECTION XVII FATHER-IN-LAW			
1. FULL NAME (Last-First-Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
[Redacted]	X Yes No		
5. STATE OTHER NAMES HE HAS USED	INDICATE CIRCUMSTANCES (INCLUDING LENGTH OF TIME) UNDER WHICH HE HAS EVER USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS THEREOF AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.		
Ray			
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)	7. PLACE OF BIRTH (City, State, Country)		
[Redacted]	Milwaukee, 22, Oregon		
8. DATE OF BIRTH	9. PLACE OF BIRTH (City, State, Country)	10. CITIZENSHIP	
[Redacted]	Minot, North Dakota	U.S. of America	
11. IF BORN OUTSIDE U.S. - DATE OF ENTRY	12. PLACE OF ENTRY	NA	
NA	NA	NA	
13. FORMER CITIZENSHIP (Country/ies)	14. DATE U.S. CITIZENSHIP ACQUIRED	15. WHERE ACQUIRED (City, State, Country)	16. CITIZENSHIP
NA	NA	NA	NA
17. OCCUPATION	18. PRESENT EMPLOYER (Give last employer, if Father-in-Law is deceased or unemployed)		
Warehouse Foreman	Rudy Wilhelm Inc., Portland, Oregon		
SECTION XVIII MOTHER-IN-LAW			
1. FULL NAME (Last-First-Middle)	2. LIVING	3. DATE OF DEATH	4. CAUSE OF DEATH
[Redacted]	X Yes No		
5. STATE OTHER NAMES SHE HAS USED	INDICATE CIRCUMSTANCES (INCLUDING LENGTH OF TIME) UNDER WHICH SHE HAS EVER USED THESE NAMES. IF LEGAL CHANGE, GIVE PARTICULARS THEREOF AND BY WHAT AUTHORITY. USE EXTRA SPACE PROVIDED ON PAGE 19 OF THIS FORM TO RECORD THIS INFORMATION.		
6. CURRENT OR LAST ADDRESS (No., Street, City, State, Country)	7. PLACE OF BIRTH (City, State, Country)		
[Redacted]	Portland 36, Oregon		
8. DATE OF BIRTH	9. PLACE OF BIRTH (City, State, Country)	10. CITIZENSHIP	
[Redacted]	Portland, Oregon	U.S. of America	
11. IF BORN OUTSIDE U.S. - DATE OF ENTRY	12. PLACE OF ENTRY	NA	
NA	NA	NA	
13. FORMER CITIZENSHIP (Country/ies)	14. DATE U.S. CITIZENSHIP ACQUIRED	15. WHERE ACQUIRED (City, State, Country)	16. CITIZENSHIP
NA	NA	NA	NA
17. OCCUPATION	18. PRESENT EMPLOYER (Give last employer, if Mother-in-Law is deceased or unemployed)		
Homemaker			
SECTION XIX RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO EITHER (1) LIVE ABROAD, (2) ARE NOT U.S. CITIZENS OR (3) WORK FOR A FOREIGN GOVERNMENT			
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	
None to my knowledge			
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	5. EMPLOYED BY		
2			
6. CITIZENSHIP (Country)	7. FREQUENCY OF CONTACT	8. DATE OF LAST CONTACT	
10. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	11. RELATIONSHIP	12. AGE	
14. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	15. EMPLOYED BY		
18. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	19. FREQUENCY OF CONTACT	20. DATE OF LAST CONTACT	
22. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	23. RELATIONSHIP	24. AGE	
26. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	27. EMPLOYED BY		
30. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	31. FREQUENCY OF CONTACT	32. DATE OF LAST CONTACT	
34. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	35. RELATIONSHIP	36. AGE	
38. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	39. EMPLOYED BY		
42. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	43. FREQUENCY OF CONTACT	44. DATE OF LAST CONTACT	
46. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	47. RELATIONSHIP	48. AGE	
50. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	51. EMPLOYED BY		
54. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	55. FREQUENCY OF CONTACT	56. DATE OF LAST CONTACT	
58. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	59. RELATIONSHIP	60. AGE	
62. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	63. EMPLOYED BY		
66. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	67. FREQUENCY OF CONTACT	68. DATE OF LAST CONTACT	
70. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	71. RELATIONSHIP	72. AGE	
74. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	75. EMPLOYED BY		
78. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	79. FREQUENCY OF CONTACT	80. DATE OF LAST CONTACT	
82. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	83. RELATIONSHIP	84. AGE	
86. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	87. EMPLOYED BY		
90. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	91. FREQUENCY OF CONTACT	92. DATE OF LAST CONTACT	
94. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	95. RELATIONSHIP	96. AGE	
98. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	100. EMPLOYED BY		
102. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	103. FREQUENCY OF CONTACT	104. DATE OF LAST CONTACT	
106. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	107. RELATIONSHIP	108. AGE	
110. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	111. EMPLOYED BY		
114. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	115. FREQUENCY OF CONTACT	116. DATE OF LAST CONTACT	
118. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	119. RELATIONSHIP	120. AGE	
122. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	123. EMPLOYED BY		
126. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	127. FREQUENCY OF CONTACT	128. DATE OF LAST CONTACT	
130. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	131. RELATIONSHIP	132. AGE	
134. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	135. EMPLOYED BY		
138. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	139. FREQUENCY OF CONTACT	140. DATE OF LAST CONTACT	
142. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	143. RELATIONSHIP	144. AGE	
146. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	147. EMPLOYED BY		
150. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	151. FREQUENCY OF CONTACT	152. DATE OF LAST CONTACT	
154. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	155. RELATIONSHIP	156. AGE	
158. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	159. EMPLOYED BY		
162. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	163. FREQUENCY OF CONTACT	164. DATE OF LAST CONTACT	
166. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	167. RELATIONSHIP	168. AGE	
170. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	171. EMPLOYED BY		
174. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	175. FREQUENCY OF CONTACT	176. DATE OF LAST CONTACT	
178. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	179. RELATIONSHIP	180. AGE	
182. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	183. EMPLOYED BY		
186. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	187. FREQUENCY OF CONTACT	188. DATE OF LAST CONTACT	
190. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	191. RELATIONSHIP	192. AGE	
194. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	195. EMPLOYED BY		
198. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	199. FREQUENCY OF CONTACT	200. DATE OF LAST CONTACT	
202. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	203. RELATIONSHIP	204. AGE	
206. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	207. EMPLOYED BY		
210. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	211. FREQUENCY OF CONTACT	212. DATE OF LAST CONTACT	
214. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	215. RELATIONSHIP	216. AGE	
218. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	219. EMPLOYED BY		
222. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	223. FREQUENCY OF CONTACT	224. DATE OF LAST CONTACT	
226. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	227. RELATIONSHIP	228. AGE	
230. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	231. EMPLOYED BY		
234. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	235. FREQUENCY OF CONTACT	236. DATE OF LAST CONTACT	
238. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	239. RELATIONSHIP	240. AGE	
242. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	243. EMPLOYED BY		
246. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	247. FREQUENCY OF CONTACT	248. DATE OF LAST CONTACT	
250. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	251. RELATIONSHIP	252. AGE	
254. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	255. EMPLOYED BY		
258. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	259. FREQUENCY OF CONTACT	260. DATE OF LAST CONTACT	
262. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	263. RELATIONSHIP	264. AGE	
266. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	267. EMPLOYED BY		
270. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	271. FREQUENCY OF CONTACT	272. DATE OF LAST CONTACT	
274. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	275. RELATIONSHIP	276. AGE	
278. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	279. EMPLOYED BY		
282. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	283. FREQUENCY OF CONTACT	284. DATE OF LAST CONTACT	
286. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	287. RELATIONSHIP	288. AGE	
290. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	291. EMPLOYED BY		
294. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	295. FREQUENCY OF CONTACT	296. DATE OF LAST CONTACT	
298. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	299. RELATIONSHIP	300. AGE	
302. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	303. EMPLOYED BY		
306. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	307. FREQUENCY OF CONTACT	308. DATE OF LAST CONTACT	
310. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	311. RELATIONSHIP	312. AGE	
314. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	315. EMPLOYED BY		
318. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	319. FREQUENCY OF CONTACT	320. DATE OF LAST CONTACT	
322. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	323. RELATIONSHIP	324. AGE	
326. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	327. EMPLOYED BY		
330. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	331. FREQUENCY OF CONTACT	332. DATE OF LAST CONTACT	
334. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	335. RELATIONSHIP	336. AGE	
338. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	339. EMPLOYED BY		
342. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	343. FREQUENCY OF CONTACT	344. DATE OF LAST CONTACT	
346. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	347. RELATIONSHIP	348. AGE	
350. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	351. EMPLOYED BY		
354. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	355. FREQUENCY OF CONTACT	356. DATE OF LAST CONTACT	
358. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	359. RELATIONSHIP	360. AGE	
362. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	363. EMPLOYED BY		
366. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	367. FREQUENCY OF CONTACT	368. DATE OF LAST CONTACT	
370. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	371. RELATIONSHIP	372. AGE	
374. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	375. EMPLOYED BY		
378. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	379. FREQUENCY OF CONTACT	380. DATE OF LAST CONTACT	
382. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	383. RELATIONSHIP	384. AGE	
386. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	387. EMPLOYED BY		
390. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	391. FREQUENCY OF CONTACT	392. DATE OF LAST CONTACT	
394. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	395. RELATIONSHIP	396. AGE	
398. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	399. EMPLOYED BY		
402. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	403. FREQUENCY OF CONTACT	404. DATE OF LAST CONTACT	
406. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	407. RELATIONSHIP	408. AGE	
410. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	411. EMPLOYED BY		
414. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	415. FREQUENCY OF CONTACT	416. DATE OF LAST CONTACT	
418. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	419. RELATIONSHIP	420. AGE	
422. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	423. EMPLOYED BY		
426. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	427. FREQUENCY OF CONTACT	428. DATE OF LAST CONTACT	
430. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	431. RELATIONSHIP	432. AGE	
434. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	435. EMPLOYED BY		
438. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	439. FREQUENCY OF CONTACT	440. DATE OF LAST CONTACT	
442. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	443. RELATIONSHIP	444. AGE	
446. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	447. EMPLOYED BY		
450. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	451. FREQUENCY OF CONTACT	452. DATE OF LAST CONTACT	
454. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	455. RELATIONSHIP	456. AGE	
458. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	459. EMPLOYED BY		
462. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	463. FREQUENCY OF CONTACT	464. DATE OF LAST CONTACT	
466. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	467. RELATIONSHIP	468. AGE	
470. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	471. EMPLOYED BY		
474. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	475. FREQUENCY OF CONTACT	476. DATE OF LAST CONTACT	
478. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	479. RELATIONSHIP	480. AGE	
482. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	483. EMPLOYED BY		
486. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	487. FREQUENCY OF CONTACT	488. DATE OF LAST CONTACT	
490. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	491. RELATIONSHIP	492. AGE	
494. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	495. EMPLOYED BY		
498. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	499. FREQUENCY OF CONTACT	500. DATE OF LAST CONTACT	
502. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	503. RELATIONSHIP	504. AGE	
506. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	507. EMPLOYED BY		
510. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	511. FREQUENCY OF CONTACT	512. DATE OF LAST CONTACT	
514. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	515. RELATIONSHIP	516. AGE	
518. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	519. EMPLOYED BY		
522. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	523. FREQUENCY OF CONTACT	524. DATE OF LAST CONTACT	
526. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	527. RELATIONSHIP	528. AGE	
530. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	531. EMPLOYED BY		
534. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	535. FREQUENCY OF CONTACT	536. DATE OF LAST CONTACT	
538. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	539. RELATIONSHIP	540. AGE	
542. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	543. EMPLOYED BY		
546. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	547. FREQUENCY OF CONTACT	548. DATE OF LAST CONTACT	
550. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	551. RELATIONSHIP	552. AGE	
554. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	555. EMPLOYED BY		
558. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	559. FREQUENCY OF CONTACT	560. DATE OF LAST CONTACT	
562. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	563. RELATIONSHIP	564. AGE	
566. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	567. EMPLOYED BY		
570. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	571. FREQUENCY OF CONTACT	572. DATE OF LAST CONTACT	
574. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	575. RELATIONSHIP	576. AGE	
578. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	579. EMPLOYED BY		
582. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	583. FREQUENCY OF CONTACT	584. DATE OF LAST CONTACT	
586. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES	587. RELATIONSHIP	588. AGE	
	</		

## SECTION XII CLASSIFIED FROM PAGE II

6. SPECIAL REMARKS, IF ANY, CONCERNING RELATIVES NOTED IN SECTION XII ABOVE

NA

## SECTION XII RELATIVES BY BLOOD, MARRIAGE OR ADOPTION WHO ARE IN THE MILITARY OR CIVIL SERVICE OF THE UNITED STATES

1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[REDACTED]	Bro-in-Law	21	U.S. of America
5. ADDRESS (Name, Street, City, State, Country)	6. TYPE AND LOCATION OF SERVICE (If known)		
Pueblo, Colorado			
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[REDACTED]	2nd Cousin	None	U.S. of America
5. ADDRESS (Name, Street, City, State, Country)	6. TYPE AND LOCATION OF SERVICE (If known)		
Virginia	AVIATION - 1st S. C. UMC		
1. NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
[REDACTED]			
5. ADDRESS (Name, Street, City, State, Country)	6. TYPE AND LOCATION OF SERVICE (If known)		

## SECTION XII REFERENCES, ACQUAINTANCES, AND NEIGHBORS

1. LIST FIVE CHARACTER REFERENCES NOT RELATIVES IN THE U.S. WHO KNOW YOU INTIMATELY

NAME (Last-First-Middle)	BUSINESS ADDRESS (No. Street, City and State)	RESIDENCE ADDRESS (No. Street, City and State)
Mr. and Mrs. [REDACTED]	San Marcos, Texas	San Marcos, Texas
Rev. [REDACTED]	Austin, Texas	Austin, Texas
Mrs. [REDACTED]	Washington, D.C.	Alexandria, Virginia
Mrs. [REDACTED]	[REDACTED]	Washington, D.C.
Cpl. [REDACTED]	Fort Worth, Texas	Hillsborough, Florida, 33511

2. LIST FIVE PERSONS IN THE U.S. WHO KNEW YOU SOCIALLY - NOT RELATIVES, SUPERVISORS OR EMPLOYERS

NAME (Last-First-Middle)	BUSINESS ADDRESS (No. Street, City and State)	RESIDENCE ADDRESS (No. Street, City and State)
Mrs. [REDACTED]	Washington, D.C.	Washington, D.C.
Mrs. [REDACTED]	[REDACTED]	Hillsborough, Florida
Mrs. [REDACTED]	Washington, D.C.	St. Louis, Missouri, 63101
Mrs. [REDACTED]	[REDACTED]	Pauls Valley, Oklahoma
Mrs. [REDACTED]	Washington, D.C.	[REDACTED]

3. LIST THREE NEIGHBORS AT YOUR MOST RECENT NORMAL RESIDENCE IN THE U.S.

NAME (Last-First-Middle)	BUSINESS ADDRESS (No. Street, City and State)	RESIDENCE ADDRESS (No. Street, City and State)
Mrs. [REDACTED]	[REDACTED]	Federal Building, Denver, Colorado
Lt. Art [REDACTED]	[REDACTED]	Denver, Colorado, 80202
Mrs. [REDACTED]	[REDACTED]	[REDACTED]

SECTION 333

## CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

**NOTE:** Last names and addresses of all club, committee, professional, amateur, auxiliary groups or organizations of one and fifteen members in or branch of any organization having headquarters or branch in a foreign country in which you belong or have belonged.

SECTION XIII

**RESIDENCES FOR THE PAST 15 YEARS**

SECTION NAME		RESIDENCE FOR THE PAST 15 Years	
ADDRESS - LAST RESIDENCE FIRST (Number, Street, City, State, Country)		INCLUDES DATES	
		FROM	TO
4736 Kenmore Ave.	4201, Alexandria, Virginia	March 1961	Aug. 1961
402 Hanover St.	Fredrickburg, Virginia	Dec. 1960	Mar. 1961
172 Bartolome Warren, Miraflores	Lima, Peru	Jan. 1961	May. 1961
Callis, Potosi,			
ESIS Building, 3rd & 5th Floors, La Palma	California	Nov. 1959	January 1961
"F" Company, Headquarters Marine Corps, Henderson	Hall, Washington D.C.	Sept. 1959	May. 1961
Cold Weather Training Battalion, Pickle Meadow,			
Palisport, California		Oct. 1959	May. 1961
Marine Corps Base, 23 Palms, California		Dec. 1957	Jan. 1958
Marine Corps Recruit Depot, San Diego, California		June 1957	Nov. 1957
Marine Corps Base, Camp Pendleton, California		Oct. 1957	Sept. 1957
501 S. Guadalupe St., San Marcos, Texas		May 1956	Sept. 1957
Howard Payne College, Brownwood, Texas		Sept. 1955	MAY 1956
501 S. Guadalupe St., San Marcos, Texas		12-6	Sept. 1955

## ●

**SECTION XXIV****ADDITIONAL INFORMATION**

1. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED, OR ARE YOU NOW OR HAD YOU EVER BEEN A MEMBER OF, OR SUPPORTED ANY GROUP OR ASSOCIATION WITH AN AGENDA, WHETHER IN WORDS OR DEEDS, WHICH ADVOCATES, SUPPORTS, OR ASSOCIATES WITH THE COMMUNIST PARTY OF THE UNITED STATES OR ANY FORCE, VIOLENCE, OR OTHER UNCONSTITUTIONAL ACTS WHICH MIGHT CRIMINALIZE PEACE OR VIOLENCE TO CERTAIN PERSONS?  YES  NO

2. IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION, EXPLAIN

3. DO YOU USE OR HAVE YOU EVER USED INTELLIGENCE?  YES  NO IF SO, TO WHAT EXTENT?

4. DO YOU USE OR HAVE YOU EVER USED NARCOTICS?  YES  NO IF SO, TO WHAT EXTENT?

5. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE ORGANIZATION OR ITS ACTIVITIES?  YES  NO IF ANSWER IS "YES", GIVE COMPLETE DETAILS

6. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES, WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940

I served 4 years in the United States Marine Corps.

7. IF TO YOUR KNOWLEDGE ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME OF THE AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION.

An investigation (I do not know by whom) was conducted prior to my departure for Bolivia where I was attached to the American Embassy. This investigation took place during August and September of 1958.

**NOTE SPECIAL:** If your answer is "YES" to the following Questions 10, 11 or 12, provide the information requested for each INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.

10. HAVE YOU, OR TO YOUR KNOWLEDGE, HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MOTOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROAD?  YES  NO

IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE

11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.  YES  NO

12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.  YES  NO

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**SECTION XXV** PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

1. NAME (First-Middle-Last)

Mrs. Daniel Flores

2. HOME ADDRESS (No. Street City Zone, State, Country)

Highland Park, D. C.

3. RELATIONSHIP

Wife

4. HOME PHONE NO.

243-5122

5. BUSINESS ADDRESS (No. Street City Zone, State, Country) - INDICATE NAME OF FIRM OR BUSINESS

Employee is employed

Boydlin and Co Francis

1000 16th St., Suite 603, Washington 6, D.C.

6. BUSINESS PHONE NO. & EXT.

DI 7-5444

7. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (NAME, CITY, STATE) WHO MAY ALSO BE NOTIFIED IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF REALTY OR OTHER REASONS, PLEASE LIST HERE

In all cases wife: Relitive, Mrs.

Seguin, Texas Telephone: Fr 9-1837

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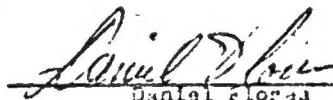
<b>SECTION XXVI</b>		<b>CERTIFICATION</b>
<b>YOU ARE INFORMED THAT THE CORRECTNESS OF ANY STATEMENT MADE IN THIS APPLICATION WILL BE INVESTIGATED.</b>		
I have read and understood the instructions. I certify that the foregoing answers are true and correct to the best of my knowledge and belief. I agree that any misstatement or omission is to a material fact will constitute grounds for immediate disapproval or rejection of my application. I also understand that any false statement made herein may be punishable by law (U.S. Code, Title 18, Section 1001).		
DATE OF SIGNATURE <i>September 5, 1961</i>	SIGNATURE OF APPLICANT <i>Daniel D. Flores</i>	STATE AT (City and State) Washington, District of Columbia
NOTE. Use the following space for extra details. Reference each continued item by enclosing item number to which it relates / sign your name at the end of the added material. If additional space is required, use extra pages the same size as this page and sign each such page.		
MARRITAL STATUS: Item #4, Section XII September 1, 1956 to October 6, 1956. Married to Lt. Col. [redacted] in Portland, Oregon, by Circuit Court Judge. Used name of Moran until November 14, 1960, when changed to Flores.		
FATHER-IN-LAW: Item #5, Section XVII Short name for Raymond		
GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL: Item #1, Section VI		
Argentina	2 July 1959 to 3 July 1959	Travel
Panama	10 November 1958 to 13 November 1958	Travel
SEE ATTACHED SHEET FOR PERTINENT INFORMATION RELATIVE TO STEP-MOTHER.		
Signed at Washington, D. C., this <u>8<sup>th</sup></u> day of September, 1961.		
<u>Daniel D. Flores</u> Daniel Flores		

ATTACHMENT TO FORM NO. 444 - PERSONAL HISTORY STATEMENT

Section XV - STEPMOTHER

Full name: [redacted]  
Living: Yes  
Other Names She Has Used: None to my knowledge  
Current Address: [redacted] San Marcos, Texas  
Date of Birth: [redacted]  
Place of Birth: Mexico  
Citizenship: Mexican  
If Born Outside U.S. - Date of Entry: December 6, 1922  
Place of Entry: Unknown  
Former Citizenship: None  
Occupation: Homemaker and Missionary  
Present Employer: Mexican Baptist Church, San Marcos, Texas  
Never served in Military or other Government service to my knowledge.

This paper is attached to and hereby made a part of Form No. 444.

  
\_\_\_\_\_  
Daniel Flores

CONFIDENTIAL  
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 19 January 1962

YOUR  
REFERENCE: 07100 OPEER

CASE NO. : 195221

TO : Director of Personnel  
FROM : Director of Security  
SUBJECT : FLORES, Daniel

1. This is to inform you of security approval of the subject person as follows:

Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.

Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

FOR THE DIRECTOR OF SECURITY:

  
Chief, Personnel Security Division

OFFICE OF SECURETY